2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000075311

Entity Name

OPTI - SYSTEMS OF PEMBROKE PINES, INC.

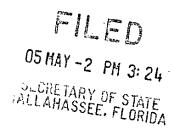


Principal Place of Business

8160 PINES BLVD PEMBROKE PINES, FL 33024 Mailing Address

8160 PINES BLVD

PEMBROKE PINES, FL 33024





DO NOT WRITE IN THIS SPACE

05022005 No Chg-P CR2E034 (10/03)

4. FEI Number		Applied For
65-0281263		Not Applicable
5. Certificate of Status Desired	\$8.75 . Fee,Requ	Additional uired

6. Name and Address of Current Registered Agent

PLUS, LEDGER 8160 PINES BLVD PEMBROKE PINES, FL 33024

SIGNATURE:

DO NOT WRITE IN THIS SPACE

			1					
	named entity submits this statement for the pions of registered agent.	purpose of changing its req	gistered office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept			
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					DATE			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Finance Trust Fund Contribution.		~	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.				
10.	OFFICERS AND DIRE	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NIX, JAMES R 1131 NW 96TH TERR PEMBROKES PINES, FL 33024			en e	0005420642 0			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JEFFERSON, LINDA 1084 N HIATUS RD PEMBROKES PINE, FL 33026			90054206429 05/10/0501041025 ***150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			··· .	DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
indicated of the co	on this report or supplemental report is true	and accurate and that my	signature shall have	ve the same legal effe	(i), Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if			

AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR