


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 18, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000007361</b> 1. Entity Name LINCOLN INTERNATIONAL, INC.	
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Principal Place of Business 6507 HARNEY ROAD TAMPA, FL 33610	Mailing Address 6507 HARNEY ROAD TAMPA, FL 33610
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**DO NOT WRITE IN THIS SPACE**



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3556450	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstalling) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NIEZGODA, ROBERT J 3342 BRIAN RD. N. PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SIMONS, NORMAN J 4 LAKEWOOD DR. ORCHARD PARK, NY 14127
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PALISANO, TIMOTHY J 97 FORESTAL DR. HAMBURG, NY 14075
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PALISANO, WILLIAM T 109 VICTORY AVE. HAMBURG, NY 14075
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PALISANO, JOHN J 222 E. MAIN ST. HAMBURG, FL 14075
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert J. Niezgoda SR. V.P. 4-14-05 813-246-4723  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ROBERT J. NIEZGODA