## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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BARBAYAN, RUZANNA  ABPHILES FL 24113  PO BOX 8628  UAPLES, FL 34109  Street Address (P.O. Box Number is Not Acceptable)  PL ZO Code  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 lamidar with, and accept the contiguitions of registered of provide an appropriate significant of the provider of the state of Florida. I am lamidar with, and accept the contiguition of registered agent, or both, in the State of Florida. I am lamidar with, and accept the contiguition of registered agent, or both, in the State of Florida. I am lamidar with, and accept the contiguition of registered agent, or both, in the State of Florida. I am lamidar with, and accept the contiguition of registered agent, or both, in the State of Florida. I am lamidar with, and accept the contiguition of registered agent, or both, in the State of Florida. I am lamidar with, and accept the contiguition of registered agent, or both, in the State of Florida. I am lamidar with, and accept the contiguition of registered agent, or both, in the State of Florida. I am lamidar with, and accept the contiguition or registered agent, or both, in the State of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the state of Florida. I am lamidar with, and accept the floridar acceptance of Floridar acceptance		6. Name and Address of Current			<u>43.7</u> 4		7. Name an	d Address of New R			<u> </u>	
Super Addisors (P.O. Box Number is Not Acceptable)  NAPLES FL 34 (09)  The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the accept of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the accept of Florida. I am familiar with, and accept the accept of Florida. I am familiar with, and accept the accept of Florida. I	-				Name					-		
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