2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 10, 2005 08:00 AM

8. The above named entity 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. SIGNATURE Signature, typed or printed name of registered agent agent and the if supplicable (NOTE Registered Agent signature required when reheating) PELE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS INC. DO NOT WRITE IN THIS SPACE IN THIS	DOCUMENT # P99000027216 1. Entity Name LISA BODIE, P.A.	:-		Se	cretary of State
DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3559550 Not Applied For 59-3559550 S. Certificate of Status Desired Service Ser	511 JANICE PLACE 511	JANICE PLACE	85	7 10 0 11 10 11 10 10 10 10 10 10 10 10 1	: 40/18 (78/1/ 1887) 1108) 7/4/18 9/7/10/17 1/4/10
59-3559580 Not Applicate 59-3559580 Status Desired	DO NOT WRITE IN	TUIS SPA	THE STREET STREET	, , , , , , , , , , , , , , , , , , ,	
6. Name and Address: of Current Registered Agent BODIE, LISA 511 JANICE PLACE INDIAN ROCKS BEACH, FL 33785 B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent agent and the Fapilicable (NOTE Registered Agent signature required when remasting) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS Trust Fund Contribution Added to Fees SIRE! ADDIE, LISA SIRE! ADDRESS STILL JANICE PLACE INDIAN ROCKS BEACH, FL 33785 TITLE MAME SIRE! ADDRESS STILL JANICE PLACE INDIAN ROCKS BEACH, FL 33785					Applied For Not Applicable
BODIE, LISA 511 JANICE PLACE INDIAN ROCKS BEACH, FL 33785 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 Signature, upad or privation are of registered agent and tile if applicable RNOTE Registered Agent signature required after required agent, or both, in the State of Florida. I am familiar with, and accept required agent, or both, in the State of Florida. I am familiar with, and accept required agent, or both, in the State of Florida. I am familiar with, and accept required agent, or both, in the State of Florida. I am familiar with, and accept required agent, or both, in the State of Florida. I am familiar with, and accept required agent, or both, in the State of Florida. I am familiar with, and accept required agent, or both, in the State of Florida. I am familiar with, and accept required agent, or both, in the State of Florida. I am familiar with, and accept required agent, or both, in the State of Florida. I am familiar w	Let a service of the				S8.75 Additional Fee Required
Title obligations of registered agent. SIGNATURE Signature, typad or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE	BODIE, LISA 511 JANICE PLACE	ad Agent		DO NOT W	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 in changed, or on an attachment with an other like empowered. SIGNATURE: SIGNATURE:					