2005 FOR PROFIT CORPORATION 'ANNUAL REPORT

May 02, 2005 08:00 AM Secretary of State DOCUMENT # P99000058805 BENNETT STATION, INC. Principal Place of Business Mailing Address 17700 NW 2 AVE 12305 S DIXIE HWY MIAMI, FL 33179 MIAMI, FL 33156 04212005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0989445 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GORMAN, LENARD H DO NOT WRITE 1320 S DIXIE HWY PENTHOUSE 1275 IN THIS SPACE CORAL GABLES, FL 33146 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 SIGNATURE Signature, typed or primed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 16. STP TITLE NAME FONTECILLA, CARLOS STREET ADDRESS 12305 S DIXIE HIGHWAY מל-17-51 MIAMI, FL 33156 TITLE NAME BEGELMAN, CAROL U00000351580 N5/N2/N5-80151-011 150.00 STREET ADDRESS 12305 S DIXIE HWY CITY-ST-ZIP MIAMI, FL 33156 TITLE NAME STREET ADDRESS. DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE KAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P

12. I hereby certify that the information supplied with this filling 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 if

changed, or on an attachment with an address, with all other like empowered.

TURE OR TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \(\(\)

FILED