2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2005
Secretary of State

DOCUMENT# P99000064489

Entity Name: ADVANTAGE PLANT DESIGN & LEASING, INC.

Current Principal Place of Business:

768 NORTH NOVA RD.
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

768 NORTH NOVA RD.
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 59-3603209 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POWER, JESSE A
1615 MAGNOLIA ST.
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: POWER, RALPH J
Address: 1615 MAGNOLIA ST.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: V ( ) Delete
Name: POWER, ALETHA B
Address: 1615 MAGNOLIA ST.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: ST ( ) Delete
Name: CORTESE, BARBARA T
Address: 101 N DAYTONA AVENUE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: O ( ) Delete
Name: POWER, JEFFREY D
Address: 163 COUNTRY CLUB DR.
City-St-Zip: ORMOND BEACH, FL 32176

Title: P ( ) Delete
Name: POWER, JESSE A
Address: 1615 MAGNOLIA ST.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition
Name: POWER, RALPH J
Address: 1615 MAGNOLIA ST.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JESSE A. POWER P 01/14/2005

Electronic Signature of Signing Officer or Director — Date