2005 FOR PROFIT CORPORATION ANNUAL REPORT					FILED Jan 24, 2005 8:00 am		
DOCUMENT # P99000111491 1. Entity Name D & A FAMILY CORP.						tary of S 90054 035 ***1	
394 S MAYA	ce of Business I PALM DR N, FL 33432	Mailing Address 394 S MAYA PALM DR BOCA RATON, FL 33432				5	0005817
2. Principal Placency Business /0/ Plaza Rol Feel 5 3. Maijing Actings JOI Plaza Rol Feel 5 Suite, Apt. #, etc. # [0]8 Suite, Apt. #, etc.			Reals	01192005	Chg-P	CR2E034 (10/03)	
Fity & Star		City & State 130cu Dal	m FL	4. FEI Numb			oplied For ot Applicable
^z 334	8. Name and Address of Current F	33432	Blin Boa		e of Status Desired	\$8.75 Adv Fee Require Registered Agent	
394 S MA	Y, DALE M YA PALM DR TON, FL 33432		Name Street Ad	dregoru dresport, p. Box Numt Plaza	1 Dale	<u>M</u>	
			CityBo	ca Pato	r	FL Zip Cod	432
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 (Voted or privated name of registered sports and the II applicate). NOTE: Registered Agent signature (registered when (rinstating)) DATE							
FILE NOWIII FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee will be \$350.00 Trust Fund Contribution. Added to Fees							
10.	OFFICERS AND E		11.	ADDITIONS	CHANGES TO OF	FICERS AND DIRECTOR	S IN 11
title Name Street address City - St - Zip	PD GREGORY, DALE M 394 S. MAYA PALM DR BOCA RATON, FL 33432	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	101 Plaza	Road 57	#6/8 ^{Terchange}	Addition
TITLE NAME Street adoress City-st-zip	STD GREGORY, AGNES 394 S MAYA PALM DR BOCA RATON, FL 33432	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
. TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u></u>		Change	Addition
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 if changed, or on an attachment with an address, with all other fike empowered.							
SIGNATURE:							
			<i>v</i>				

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