2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 07, 2005 08:00 AM Secretary of State

407-248 5/11

Ďaytime Phone ₹

7-2-05

Date

_ '	MINUAL	NEFORI_		_		, _ ,	A
1. Entity Nam	OCUMENT # S29990 ntity Name DMESTEAD ACQUISITION CORP.			Secretary of State			
Principal Place 7031 GRAND STE 106 B ORLANDO, FI	NATIONAL DRIVE	Mailing Address 7031 GRAND NATIONAL DRIVE STE 106 B ORLANDO, FL 32819 US) 	- 1700 - 1800 - 1800 - 1800 - 1800 - 1800		
D	O NOT WRITE	IN THIS SPA	CE	02022005 4. FEI Numbe 59-307	No Chg-P	CR2E034 (10/03)	plied For Applicable
6. Name and Address of Current Registered Agent BERMAN, GUSTAVO D 7031 GRAND NATIONAL DRIVE STE 106 B ORLANDO, FL 32819			DO NOT WRITE IN THIS SPACE				
the obligati	named entity submits this statement for tions of registered agent. Signature, typed or printed name of registered agent are		ed office or register		th, in the State of Flo	rida. I am familiar with, a	and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				.00 May Be led to Fees			Ar
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD BERMAN, GUSTAVO DANIEL 7031 GRAND NATIONAL DRIVE ORLANDO, FL 32819	RECTORS					
YITLE NAME STREET ADDRESS CITY-ST-ZIP					02/07/05-	218525 21852	0.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT W		The Alles of the Control of the Cont
NAME STREET ADDRESS CITY-ST-ZIP				-IN	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					·		·-··
TITLE NAME STREET ADDRESS CITY-ST-71P		, , , , , , , , , , , , , , , , , , , ,				endede (m. 1919). Pro-	12.11.71.2

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 1 further certify that the information indicated on this report or supplemental report is truefand appurate 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, wall fell other like empowered.

INTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _

SIGNATURE AND TYPED OF