


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED  
Mar 18, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # S67474**

1. Entity Name  
NUMEK, INC.



Principal Place of Business      Mailing Address

6935 OLD CHENEY HWY      6935 OLD CHENEY HWY  
ORLANDO, FL 32807      ORLANDO, FL 32807

**DO NOT WRITE IN THIS SPACE**



01252005    No Chg-P    CR2E034 (10/03)

4. FEI Number      Applied For  
59-3076518      Not Applicable

5. Certificate of Status Desired        \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SNELLER, ALAN  
6935 OLD CHENEY HWY  
ORLANDO, FL 32807

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST SNELLER, ALAN 6935 OLD CHENEY HWY. ORLANDO, FL 32807
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03/18/05-80052-012 150.00

**DO NOT WRITE  
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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)(f), 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.

SIGNATURE: Chris Sneller      2-1-05 402 737 7282  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #