## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED** Jul 13, 2005 08:00 AM Secretary of State

711	
Mailing Address	4
704 SW 34TH ST	
FT LAUDERDALE, FL 33315	US .
	Mailing Address 704 SW 34TH ST SUITE 205



## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07052005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0280340 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

954 35g

OSTHEIMER, DAVID

6. Name and Address of Current Registered Agent

## DO NOT WRITE ST A&D BRITTANIA, INC. 704 SW 34 ST, STE 205 IN THIS SPACE FT LAUDERDALE, FL 33315

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						
1 122 110 11111 1 22 10 4 10 0100		Election Campaign Financi     Trust Fund Contribution.	ig $\Box$	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS						
THTLE NAME STREET ADDRESS CITY - ST - ZIP	PD GREGORY, ANSEL A. 9265 DUNDEE DRIVE LAKE WORTH PALM BEACH, FL 334	467	<u></u>	· · · · · · · · · · · · · · · · · · ·	100000370544	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD OSTHEIMER, DAVID E. 7124 SW 162 WAY FT LAUDERDALE, FL 33331		<del></del>	<del></del>	U00000372544 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u> </u>	DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				·s· <del>-</del>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 of trustee empowered to Secure 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.						