2005 FOR PROFIT CORPORATION

12. I hereby certify that the information supplied with indicated on this report or supplemental report is

rustee emp an address

of the corporation or the receiver or changed, or on an attachment with

SIGNATURE:

Mar 23, 2005 8:00 am ANNUAL REPORT (AR) Secretary of State **DOCUMENT # \$98163** 03-23-2005 90041 047 ***150.00 LAW FIRM OF MANFRED ROSENOW, P.A. Principal Place of Business Mailing Address 2425 CORAL WAY 601 S.W. 57 AVE. **MIAMI FL 33145** MIAMI FL 33144 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) 601 SW 57th Avenue Suite D 601 SW 57th Avenue Suite D City & State City & State Applied For 4. FEI Number 65-0303030 Miami, FL Not Applicable Miami Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 33144 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name ROSENOW, MANFRED ROSENOW, MANFRED Street Address (P.O. Box Number is Not Acceptable) 601 SW 57th Avenue Suite D 2425 CORAL-WAY MIAMI FL 33145. --Zip Code Miami 33144 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 register ed agent. 03/14/05 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DPST TITLE ☐ Delete TITLE **XX** Change ☐ Addition ROSENOW, MANFRED ROSENOW, MANFRED NAME STREET ADDRESS 2425 CORAL WAY STREET ADDRESS 601 SW 57th Avenue Suite D CITY-ST-ZIP MIAMI FL CITY-ST-7IP Miami, FL 33144 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition TiTLE Delele ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Detete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information rue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director wered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

265 0006

Manfred Rosenow/President

FILED