2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Feb 02, 2005 08:00 AM DOCUMENT # V12236 **Secretary of State** ANTHONY D. HALL, C.P.A., P.A. Principal Place of Business ___ Mailing Address 3050 UNIVERSAL BLVD. 3050 UNIVERSAL BLVD. SUITE 130 SUITE 130 WESTON, FL 33331 WESTON, FL 33331 US CR2E034 (10/03) 01242005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 65-0308179 \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent HALL, ANTHONY D. DO NOT WRITE 3050 UNIVERSAL BLVD. **SUITE 130** IN THIS SPACE WESTON, FL 33331 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) <u> 1,00000211849</u> 02/03/05-80003-013 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OUQUAGE FAIL OFFICERS AND DIRECTORS 10. 172/03/05-80003-014 8.75 CEOP TITLE HALL, ANTHONY D NAME 3050 UNIVERSAL BLVD. SUITE 130 STREET ADDRESS WESTON, FL 33331 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME

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 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

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANTHONY

HALL