

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V23750

**FILED**  
**Feb 23, 2005**  
**Secretary of State**

**Entity Name:** POWER SCOPING & CONSULTING, INC.

**Current Principal Place of Business:**

2394 SW 10 AVENUE  
BOYNTON BEACH, FL 33426 US

**New Principal Place of Business:**

**Current Mailing Address:**

2394 SW 10 AVENUE  
BOYNTON BEACH, FL 33426 US

**New Mailing Address:**

**FEI Number:** 65-0322317      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORRIS, SHIRLEY  
2394 SW 10 AVE  
BOYNTON BEACH, FL 33426 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: MORRIS, SHIRLEY  
Address: 2394 SW 10 AVE  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VTD ( ) Delete  
Name: MORRIS, JOHN  
Address: 2394 SW 10 AVE  
City-St-Zip: BOYNTON BEACH, FL 33426

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHIRLEY MORRIS

PRES

02/23/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date