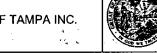
DO NOT WRITE IN THIS SPACE

2005 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # V25540 DAVIS ACCOUNTING & TAX SERVICES OF TAMPA INC.

Apr 04, 2005 8:00 am Secretary of State 04-04-2005 90084 003 ***150.00

TOPPOPUUP



Principal Place of Business

5111 NEBRASKA AVE TAMPA, FL 33603

Mailing Address

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

5111 NEBRASKA AVE TAMPA, FL 33603



FILED

01262005

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3113063 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, WAYNE C 5111 NEBRASKA AVE TAMPA, FL 33603

SIGNATURE:

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renstating) DATE					
9 Election Compount Financia			,	\$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	
10.	OFFICERS AND DIREC	CTORS	80180186180186		I
THILE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, WAYNE C 5111 NEBRASKA AVE TAMPA, FL				
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D DAVIS, WILMA J 5111 NEBRASKA AVE TAMPA, FL	J-1	DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY+ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby 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 an articless, with all other like empowered.					