2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Feb 26, 2005 08:00 AM Secretary of State

1. Entity Nar	IMENT # V52011 NO SERVICE, INC.			Se	ecretary of State
1636 COCO	ce of Business ANUT ROAD LE, FL 32224	Mailing Address 1636 COCOANUT ROAD JACKSONVILLE, FL 32224			FIRE BUILD STORM BUILD B
	OO NOT WRITE 5. Name and Address of Current Re		CE	02152005 No Chg-P 4. FEI Number 59-3136997 5. Certificate of Stalus Desired	CR2E034 (10/03) Applied For Nor Applicable \$8.75 Additional Fee Required
				DO NOT W IN THIS SI	VRITE
the obligation of the obligati	e named entity submits this statement for the tions of registered agent. Signature, typed or printed name of registered agent and the NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00		ad Agent signature required nating\$5.		Florida. I am familiar with, and accept
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF DVS MILLER, BRENDA 1636 COCOANUT ROAD JACKSONVILLE, FL 32224 T MILLER, BRENDA 1636 COCOANUT ROAD JACKSONVILLE, FL 32224	ECTORS		of the transfer of the second	0024466 5-80022-008 15 0.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, PAUL 1636 COCOANUT ROAD JACKSONVILLE, FL 32224	· · · · · · · · · · · · · · · · · · ·		DO NOT W IN THIS SI	· * # # * * * * * * * * * * * * * * * *
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby of indicated of the cor	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empower or on an attachment with an address, with	ed to execute this report as requi	mption stated in Secture shall have the street by Chapter 607,	ction 119.07(3)(f), Florida Statutes ame legal effect as if made under Florida Statutes, and that my name	.1 further certify that the information cath; that I am an officer or director ne appears in Block 10 or Block 11 if