## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

## FILED Jan 17, 2006 08:00 AM Secretary of State

ANNUAL REPORT				Socretary of State			
DOCUMENT # V69710  1. Entity Name				Secretary of State			
	IATIONAL, INC.						
Principal Place of Bu 400 S. US HIGHWA' SUITE #4	Y ONE	Mailing Address 400 S. US HIGHWAY ONE SUITE #4	_				
JUPITER, FL 3347		JUPITER, FL 33477	<del></del>				
				}		I BURIU BURIU BURIU	RIBIR RIBIR RIBIRER II (REC
DO NOT WRITE IN THIS SP			ACE.	01062006	No Chg-P	CR2E03	4 (11/05) Applied For
				4. FEI Numb			Not Applicabl
6.	Name and Address of Current Re	agistered Agent	}	5. Certificate	of Status Desired		8.75 Additional ee Required
CULLIFER, RIC		200	NICT IN	DITE			
8745 S.E. COMPASS ISLAND WAY JUPITER, FL 33458			DO NOT WRITE IN THIS SPACE				
				HV	1 1119 9F	ACE	
8. The above named the obligations of	d entity submits this statement for t registered agent.	he purpose of changing its register	ed office or register	red agent, or bo	oth, in the State of Flo	orida. I am fa	miliar with, and accept
SIGNATURE			<u></u>				
Signatur	e, typed or printed name of registered agent and	I title if applicable (NOTE Registere	ed Agent signature required	d when reinstating)	Loonor	DATE TODOS AO	
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.			ncing \$5	.00 May Be led to Fees	01/19/06	)988148 -80062-	016 150.00
TITLE OP	OFFICERS AND D	RECTORS					
NAME GUL	LIFER, RICHARD H		1				
1 1	5 S.E. COMPASS ISLAND WA ITER, FL 33458	Y 	<u>]</u>				
TITLE							
STREET ADORESS CITY-ST-ZIP							
TITLE NAME			1				
STREET AGORESS CITY-ST-ZIP			Ì	og	NOT W	RITE	•
TITLE			1		THIS SE		
NAME STREET ADDRESS			1	2 i W	11110 01	70 <u>-</u>	
CITY-\$T-ZIP			4				
NAME							
STREET_ADDRESS CITY+SI-ZIP							
TITLE NAME			1				
STREET ADDRESS			1				

12. Thereby certify that the Information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 charged, or on an attachment with an addings, with all other like empowered.