2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DISPECTOR

SIGNATURE: 1

FILED Feb 22, 2005 08:00 AM Secretary of State

February 18, 2005 702 315-5196

Daytime Phone #

		<u> </u>			~»,	
DOCUMENT # P22683 1. Entity Name MYAL PARTNERSHIP MANAGEMENT SERVICES, INC.			Secretary of Star			
		ailing Address				
818 W. BRO		318 W. BROOKS AVE. NORTH LAS VEGAS, NV 89030)			
NORTH DO	7E@15, 114 05050	10.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	,	t the straint are times of Fra		en Tibri Silliyar il 1891
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			•)	MANAN EMINE HAY BANKA MANAN MARAN MARAN	
DO NOT WRITE IN THIS SPACE			CE	01062005 No 0	Chg-P CR2E034	(10/03)
				4. FEI Number 95-3700598		Applied For Not Applicable
					Desired 🕱 \$8	.75 Additional
		Tricker Tricker	refer to the second of	5. Certificate of Status		Required
	6. Name and Address of Current Regis	tered Agent				
PUTNAM,	PAULA		}	DO NO	TWOITE	
612 NW 2ND STREET			DO NOT WRITE			
OCALA, FL 34475			IN THIS SPACE			
			ļ		-	
), .	<u> </u>		
	named entity submits this statement for the patients of registered agent.	ourpose of changing its register	ed office or register	ed agent, or both, in the	State of Florida. I am fami	liar with, and accept
file obliča	iions oi registered agent.		•			
SIGNATURE.	Signature, typed or printed name of registered agent and little	il applicable (NOTE Registere	d Agent signature required	when reinstaling)	DATE	
	agrander, types of prince have of registered agent and have	ground. ground in				
FIL	E NOW!!! FEE IS \$150.00	9. Election Campaign Finar	ncing _ \$5.	00 May Be		
	ay 1, 2005 Fee will be \$550.00	Trust Fund Contribution.	. Add	ed to Fees		
10.	OFFICERS AND DIREC	CTORS ,	<u> </u>	·		
TITLE	PTD	-	1			
NAME	BIRD, ALLAN'S		,			
STREET ADDRESS CITY-ST-ZIP	818 W. BROOKS AVE. NORTH LAS VEGAS, NV 89030				/00000239002 22/05-80026-00	~ 1 m ~ m m
TITLE	D	<u> </u>	i	Ud/ c	(4/02-81)1156-011	b 158.75
NAME	BIRD, JOSHUA D	,				
STREET ADDRESS	818 W. BROOKS AVE.		}			, ,
CITY-ST-ZIP	NORTH LAS VEGAS, NV 89030	<u> </u>		· · ·	. •	
TITLE NAME	VS GREEN, PATRICIA M		1			
STREET ADDRESS	818 W. BROOKS AVE.		l .	DO NO	T 14/2017	
CITY-ST-ZIP	NORTH LAS VEGAS, NV 89030	g %		טא טע	T WRITE	
TITLE			ľ	IN THIS	SSPACE	
NAME			ı	414 8 8 141		
STREET ADDRESS CITY-ST-ZIP	-					
TITLE						
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CITY-ST-ZIP		ر في الياسيسانيين در الياسي		,	<i>;</i>	
TITLE						
NAME STREET ADDRESS			1			
CITY-ST-ZIP						•
12. I hereby	pertify that the information supplied with this fil	ling does not qualify for the exer	nption stated in Sec	ction 119.07(3)(i), Florida	Statutes, I further certify the	nat the information
indicated of the cor changed,	pertify that the information supplied with this fil on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	ing accurate and that my signat I to execute this report as requit other like empowered.	ure snall have the s red by Chapter 60.	Florida Statutes; and the	de under oath; that I am a at my name appears in Bio	ock 10 or Block 11 if