2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000062290 1. Entity Name S17TPA, CORP.					Y Y	FILED 05 JUL 20 Fil 4: 33				
Principal Place of Business Mailing Address										
		5101 NW 79 AVE MIAMI, FL 33166			SECHE TALLAH	dans sans 1000		,)		
2. Principal P	lace of Business	3. Mailing Address								
Suite, Apt. #, etc.		Sulte, Apt. #, etc.	Sulte, Apt. #, etc.		07192005	Chg-P	CR2E03	34 (10/03)		
City & State		City & State		4. FEI Number 47-087				plied For t Applicable		
Zip	Country	Zip	Zip Country			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
	8. Name and Address of Current R	egistered Agent		Name	7. Name and	Address of New	Registered A	gent		
BONVECCHIO, ALAIN M				Street Address (P.O. Box Number is Not Acceptable)						
5101 N.W MIAMI, FL	79TH AVENUE 33166		Street Address			(r.v. box number is not acceptable)				
			Clh					7in Code		
6 The shows		Ab	City				FL	Zip Code		
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, typewor primed name of registered agent and title # applicable. (NOTE: Registered Agent sonature required when renstating) DATE										
	Signature, typed or printed name of registered agent ar	to the a appacable. (NOTE:	Hegistered	Agent signature req	ured when rematating)		DATE			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Finar Trust Fund Contribution.					\$5.00 May Be Added to Fees	In accordance corporation did	with s. 607. I not receive	193(2)(b), the prior r	F.S., the notice.	
TITLE	OFFICERS AND D	DIRECTORS Delete	11.		ADDITIONS	CHANGES TO OF	FICERS AND	DIRECTORS Change	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	BONVECCHIO, ALAIN M 5101 N.W. 79TH AVENUE MIAMI, FL 33166	□ oeste	NAME	T ADDRESS				CT Change	Accilion	
TITLE			TITLE					Change	Addition	
NAME STREET ADORESS CITY-ST-ZIP	BONVECCHIO C., ALAIN 5101 N.W. 79TH AVENUE MIAMI, FL 33166		NAME STREET ADDRESS CITY-ST-ZIP		3 08/1	00058 6/05010	8 644 21013	643 **15(0.00	
TITLE	TS Delete		TITLE					Change	Addition	
NAME Street address City-St-Zip	BONVECCHIO C., ADOLFO H 5101 N.W. 79TH AVENUE			T ADDRESS						
TITLE			TITLE	οι- <i>Δ</i> Γ	<u> </u>			☐ Change	Addition	
NAME Street address City-St-Zip	BONVECCHIO C., ARIANNE B 5101 N.W. 79TH AVENUE		NAME Street City-s	T ADDRESS ST-ZIP					_	
TITLE			TITLE					☐ Change	Addition	
NAME Street adoress City-St-Zip				T AODRESS ST-ZIP						
TITLE NAME		☐ Delete	TITLE					Change	☐ Addition	
STREET ADORESS CITY-ST-ZIP			CTTY-S	T ADDRESS ST-ZIP						
indicated of the cor	certily that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee emporor on an attachment with an address, w	irue and accurate and that my wered to execute this report a	v Ricnatu	ire shall have t	the same legal effec	t as if made under	neth that I as	m an officer	or director	
changed, or on an attachment with an address, with all other like employee and T-19-05 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF BIGINGS OF PICER OR DIRECTOR Date Descriptor										
<u></u>	www.ions.mu tireu un Fr	THE PARTY OF	DINEUTU	···			De	yurtas PTIONE IF		