

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90309 009 \*\*\*150.00

**DOCUMENT # F00000002633**

1. Entity Name  
**STICKARS INC.**



Principal Place of Business  
P.O. BOX 4249  
NORTH FORT MYERS, FL 33918

Mailing Address  
P.O. BOX 4249  
NORTH FORT MYERS, FL 33918

**54045009**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02062004

Chg-P

CR2E034 (10/03)

4. FEI Number

76-0564484

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBBINS, HOWARD C  
36 PLUTO CIRCLE  
N. FORT MYERS, FL 33903

Name Robbins, Howard C  
Street Address (P.O. Box Number is Not Acceptable)  
3163 Pluto Circle  
City N. Ft. Myers FL Zip Code 33903

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 reinstating)

DATE

Mary E. Robbins

1/31/04

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDVP ☐ Delete  
NAME ROBBINS, HOWARD  
STREET ADDRESS 36 PLUTO CIRCLE  
CITY-ST-ZIP N. FORT MYERS, FL 33903

TITLE PDVP ☒ Change ☐ Addition  
NAME Robbins Howard  
STREET ADDRESS 3163 Pluto Circle  
CITY-ST-ZIP N. Ft. Myers FL 33903

TITLE DST ☐ Delete  
NAME ROBBINS, MARY E  
STREET ADDRESS 36 PLUTO CIRCLE  
CITY-ST-ZIP N. FORT MYERS, FL 33903

TITLE DST ☒ Change ☐ Addition  
NAME Robbins MARY E  
STREET ADDRESS 3163 Pluto Circle  
CITY-ST-ZIP N. Ft. Myers FL 33903

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Mary E. Robbins

1/31/04

239-656-3721