

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90321 027 ***150.00

14000570



04182005 Chg-P CR2E034 (10/03)

4. FEI Number
72-0270930

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

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

Name

Street Address (P.O. Box Number is Not Acceptable)

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CCEO	<input type="checkbox"/> Delete
NAME	KURZ, GERHARD E	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316	
TITLE	PD	<input type="checkbox"/> Delete
NAME	WILLRICH, L. STEPHEN	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316	
TITLE	VPTD	<input type="checkbox"/> Delete
NAME	DE SOSTOA, VINCENT J	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316	
TITLE	VPSP	<input type="checkbox"/> Delete
NAME	FINCH, STEPHEN B	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316	
TITLE	VP	<input type="checkbox"/> Delete
NAME	TELFORD, BRIAN	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316	
TITLE	SVPO	<input type="checkbox"/> Delete
NAME	TWAITS, ALAN R	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HARVEY J. MOTT	
STREET ADDRESS	2200 Eller Dr., Ft. Lauderdale, FL 33316	
CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MICHAEL J. PELLICCI	
STREET ADDRESS	2200 Eller Dr., Ft. Lauderdale, FL 33316	
CITY-ST-ZIP		
TITLE	SVP/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VINCENT J. DESOSTOA	
STREET ADDRESS	2200 Eller Dr., Ft. Lauderdale, FL 33316	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SB Finch

Stephen B. Finch

4/18/05

(954) 523-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #