


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2005 08:00 AM
Secretary of State

DOCUMENT # F04000007298
 1. Entity Name
BULLS EYE ENVIRONMENTAL, INC.



Principal Place of Business Mailing Address
7100 N. RADCLIFFE STR. #101-A **P.O. BOX 1626**
BRISTOL, PA 19007 **TULLYTOWN, PA 19007**

DO NOT WRITE IN THIS SPACE



04122005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
23-2655395 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
AGENTS AND CORPORATIONS, INC.
773 4TH AVE. NORTH SUITE E
NAPLES, FL 34102

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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 _____ (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	P
NAME	ROSELLI, JOHN
STREET ADDRESS	1834 MORGAN LANE
CITY-ST-ZIP	COLLEGEVILLE, PA 19426
TITLE	V
NAME	SCHNEIDER, JAMES
STREET ADDRESS	6 TUDOR LN.
CITY-ST-ZIP	MOORESTOWN, NJ 08057
TITLE	S
NAME	O'NEILL, GROVER JR.
STREET ADDRESS	30 ROCKEFELLER PLAZA ROOM 5432
CITY-ST-ZIP	NEW YORK, NY 10112
TITLE	D
NAME	PETIT, ROBERT W
STREET ADDRESS	30 ROCKEFELLER PLAZA ROOM 5432
CITY-ST-ZIP	NEW YORK, NY 10112
TITLE	D
NAME	NASH, CLAUDE
STREET ADDRESS	30 ROCKEFELLER PLAZA ROOM 5432
CITY-ST-ZIP	NEW YORK, NY 10112
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/23/05-80059-003 150.00

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: John Roselli 4/14/05 215-547-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #