


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90072 024 ***150.00

DOCUMENT # P01000108556

1. Entity Name
ECONOFILTERS, INC.



Principal Place of Business
2280 NW 30 PLACE
POMPANO BEACH, FL 33069

Mailing Address
2280 NW 30 PLACE
POMPANO BEACH, FL 33069

50015077



2. Principal Place of Business
3701 NE 12 Avenue
 Suite, Apt. #, etc.

3. Mailing Address
3701 NE 12 Avenue
 Suite, Apt. #, etc.

02022005 Chg-P CR2E034 (10/03)

City & State
Pompano Beach, FL

City & State
Pompano Beach, FL

Zip
33064

Country
USA

Zip
33064

Country
USA

4. FEI Number
65-1154779

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

HORST, KIRK T
2280 NW 30 PLACE
POMPANO BEACH, FL 33069

7. Name and Address of New Registered Agent

Name
Dirk ter Horst

Street Address (P.O. Box Number is Not Acceptable)
3701 NE 12 Avenue

City
Pompano Beach FL

Zip Code
33064

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 TER HORST, DIRK | <input type="checkbox"/> Delete |
| STREET ADDRESS 2280 NW 30 PLACE | CITY-ST-ZIP POMPANO BEACH, FL 33069 | |
| TITLE VP | NAME LIPPOLD, HANS J | <input checked="" type="checkbox"/> Delete |
| STREET ADDRESS 2280 NW 30 PLACE | CITY-ST-ZIP POMPANO BEACH, FL 33069 | |
| TITLE S | NAME STROUD, NICHOLAS | <input type="checkbox"/> Delete |
| STREET ADDRESS 2280 NW 30 PLACE | CITY-ST-ZIP POMPANO BEACH, FL 33069 | |
| TITLE T | NAME ROSENDO, ANGEL | <input type="checkbox"/> Delete |
| STREET ADDRESS 2280 NW 30 PLACE | CITY-ST-ZIP POMPANO BEACH, FL 33069 | |
| TITLE | NAME | <input type="checkbox"/> Delete |
| STREET ADDRESS | CITY-ST-ZIP | |
| TITLE | NAME | <input type="checkbox"/> Delete |
| STREET ADDRESS | CITY-ST-ZIP | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|-------------------------------------|--|--|
| TITLE P | NAME Dirk ter Horst | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 3701 NE 12 Avenue | CITY-ST-ZIP Pompano Beach, FL 33064 | |
| TITLE S | NAME Nicholas Stroud | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 3701 NE 12 Avenue | CITY-ST-ZIP Pompano Beach, FL 33064 | |
| TITLE T | NAME Angel Rosendo | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 3701 NE 12 Avenue | CITY-ST-ZIP Pompano Beach, FL 33064 | |
| TITLE | NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS | CITY-ST-ZIP | |
| TITLE | NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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: _____ Date: **2/10/05** Daytime Phone #: **954 977 5220**