

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000093545

Entity Name: JOEL SHOCK TRIM INC.

FILED  
Jan 03, 2005  
Secretary of State

**Current Principal Place of Business:**

2850 NICOLE AVE  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

2850 NICOLE AVE  
KISSIMMEE, FL 34744

**New Mailing Address:**

FEI Number: 54-2134760

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHOCK, JOEL  
2850 NICOLE AVE  
KISSIMMEE, FL 34744 US

**Name and Address of New Registered Agent:**

SHOCK, JOEL  
2504 LOCKINGTON CT.  
ORLANDO, FL 32828 US

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.

SIGNATURE: JOEL SHOCK

01/03/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SHOCK, JOEL  
Address: 2850 NICOLE AVE  
City-St-Zip: KISSIMMEE, FL 34744

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SHOCK, JOEL  
Address: 2504 LOCKINGTON CT.  
City-St-Zip: ORLANDO, FL 32828

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOEL SHOCK

PRES

01/03/2005

Electronic Signature of Signing Officer or Director

Date