

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P94000043804 1. Entity Name FLEISCHMAN'S, INC.	
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Principal Place of Business 1519 E. PONDEROSA RD. FORT WALTON BEACH, FL 32547	Maining Address 1519 E. PONDEROSA RD. FORT WALTON BEACH, FL 32547
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01142005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FCI Number 59-3248322	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FLEISCHMAN, MICHAEL D 1519 E. PONDEROSA RD. FORT WALTON BEACH, FL 32547
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IN THIS SPACE**

8. The above named entity submits its 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 _____ 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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PST FLEISCHMAN, MICHAEL D 1519 E. PONDEROSA RD. FORT WALTON BEACH, FL 32547
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 a officer be empowered.

SIGNATURE:  MICHAEL D. FLEISCHMAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR