

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 14, 2005 08:00 AM
Secretary of State**

DOCUMENT # P95000097839

1. Entity Name
JOHN AND JEANNE HURTAK CORP.



Principal Place of Business

**525 N.E. 58TH STREET
MIAMI, FL 33137 US**

Mailing Address

**525 N.E. 58TH STREET
MIAMI, FL 33137 US**



01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0632965

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HURTAK, JEROME ESQ
10800 BISCAYNE BOULEVARD
SUITE #520
MIAMI, FL 33161**

**DO NOT WRITE
IN THIS SPACE**

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
NAME
STREET ADDRESS
CITY - ST - ZIP
**DCP
HURTAK, JOHN J
525 N.E. 58TH STREET
MIAMI, FL 33137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DSVP
HURTAK, JEANNE E
525 N.E. 58TH STREET
MIAMI, FL 33137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
HURTAK, JEROME
525 N.E. 58TH STREET
MIAMI, FL 33137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
HOSLEY, JANINE H
525 N.E. 58TH STREET
MIAMI, FL 33137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
HURTAK, JAMES M
525 N.E. 58TH STREET
MIAMI, FL 33137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
HURTAK, JOHN A
525 N.E. 58TH STREET
MIAMI, FL 33137**

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01/14/05-80019-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1907(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 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 190, 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 J. Hurtak
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John J. Hurtak, President



04 305-751-8585
Daytime Phone #