


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000106721
 1. Entity Name
 TESCO SUPPLY, INC.



Principal Place of Business Mailing Address
 16051 BLATT BLVD. 16051 BLATT BLVD.
 #201 #201
 WESTON, FL 33326 WESTON, FL 33326

DO NOT WRITE IN THIS SPACE



02142005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0966622	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 FERNANDO RIVERA, LUIS
 16051 BLATT BLVD., SUITE 201
 WESTON, FL 33326

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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: *Fernando Rivera C.* DATE: *4/22/05.*
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	PTD FERNANDO RIVERA, LUIS 16051 BLATT BLVD., #201 WESTON, FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ESCOBAR, HELENA MARIA 16051 BLATT BLVD., #201 WESTON, FL 33326
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/27/05-80012-001 150.00

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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)(f), 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: *Fernando Rivera C.* DATE: *4/22/05* DAYTIME PHONE #: *239 707 3528*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #