

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # 190348

1. Entity Name

STANLEY TATE BUILDERS, INC.



Principal Place of Business

1175 NE 125 ST.
SUITE 102
NORTH MIAMI, FL 33161

Mailing Address

1175 NE 125 ST.
SUITE 102
NORTH MIAMI, FL 33161



04012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-0766919

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TATE, STANLEY G.
1175 NE 125TH ST
STE 102
NORTH 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	PDT
NAME	TATE, STANLEY G
STREET ADDRESS	SUITE 102
CITY - ST - ZIP	NO MIAMI, FL
TITLE	VDS
NAME	TATE, JOANNE
STREET ADDRESS	1175 N.E. 125TH STREET
CITY - ST - ZIP	NO MIAMI, FL
TITLE	DVP
NAME	TATE, J KENNETH
STREET ADDRESS	1175 NE 125TH SUITE 102
CITY - ST - ZIP	N MIAMI, FL
TITLE	AV
NAME	TATE, JAMES DAVID
STREET ADDRESS	1175 NE 125TH ST SUITE 102
CITY - ST - ZIP	N MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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04/13/05-80010-023 150.00

**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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/05

Date

Daytime Phone #