



**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 19, 2005 8:00 am**  
**Secretary of State**

04-19-2005 90390 013 \*\*\*150.00

**40062138**



<b>DOCUMENT # 185642</b>			
1. Entity Name STOFIN CO., INC.			
Principal Place of Business ONE NORTH CLEMATIS ST SUITE 200 WEST PALM BEACH, FL 33401 US		Mailing Address ONE NORTH CLEMATIS ST SUITE 200 WEST PALM BEACH, FL 33401 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent  TABERNILLA, ARMANDO A ONE NORTH CLEMATIS ST SUITE 200 WEST PALM BEACH, FL 33401		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code	
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 _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERNANDEZ, OSCAR R	NAME	
STREET ADDRESS	ONE NORTH CLEMATIS ST SUITE 200	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP	
TITLE	DVS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TABERNILLA, ARMANDO A	NAME	
STREET ADDRESS	ONE NORTH CLEMATIS ST SUITE 200	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP	
TITLE	DP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RECIO, ALBERTO S	NAME	
STREET ADDRESS	ONE NORTH CLEMATIS ST SUITE 200	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP	
TITLE	VT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLOMQUIST, ERIK J	NAME	
STREET ADDRESS	ONE NORTH CLEMATIS ST SUITE 200	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	EV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERNANDEZ, LUIS J	NAME	
STREET ADDRESS	ONE NORTH CLEMATIS ST SUITE 200	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP	
TITLE	DEV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARSON, DONALD W	NAME	
STREET ADDRESS	ONE NORTH CLEMATIS ST SUITE 200	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 		Armando A. Tabernilla, VP	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	
		2/15/05	
		561-655-6303	
		Daytime Phone #	

(CONTINUED)

# ATTACHMENT

ATTACHMENT TO  
2005 ANNUAL REPORT

DOCUMENT #

185642

1. Corporation Name

STOFIN CO., INC.

40062138

- CONTINUED

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP	V/AS Ross, Daniel D., Esq. One North Clematis St., Suite 200 West Palm Beach, FL 33401
TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP	V Ryan, Allan A., IV One North Clematis St., Suite 200 West Palm Beach, FL 33401
TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP	V/AS Tarr, William F., Esq. One North Clematis St., Suite 200 West Palm Beach, FL 33401