

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Feb 23, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # 331355**

1. Entity Name  
CARL PELT & SONS, INC.



Principal Place of Business  
289 SOUTH KROME AVENUE  
P.O. BOX 1208  
HOMESTEAD, FL 33090-8208

Mailing Address  
289 SOUTH KROME AVENUE  
P.O. BOX 1208  
HOMESTEAD, FL 33090-8208



02112004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-1219428 Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

PETERSON, WADE ESQ  
234 N. KROME AVE.  
HOMESTEAD, FL 33030

**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 reinstalling)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

U00000061443  
02/23/04-80081-002 158,75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PELT, STEPHEN J 29320 SW 193 AV HOMESTEAD, FL 33030
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S PELT, BONNIE L 29320 SW 193 AVE HOMESTEAD, FL 33030
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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)(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 an other like empowered

SIGNATURE: Stephen J. Pelt Stephen J. Pelt 2/19/04 305-247-1428  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #