

2005 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 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



03082005 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 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

U00000263527
 03/14/05-80100-001 150.00

10. OFFICERS AND DIRECTORS

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

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

U00000263527
 03/14/05-80100-002 8.75

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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)(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:

Stephen J. Pelt Stephen J. PELT

3/11/05

305-247-1428

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #