2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

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RINTED AME OF SIGNING OFFICER OR DIRECTOR

## Jul 29, 2005 8:00 am **DOCÜMENT # 339227** Secrétary of State 1.∾Entity Name 07-29-2005 90011 009 \*\*\*150.00 WEBB BOLT & NUT COMPANY Principal Place of Business Mailing Address 2830 TAFT AVENUE P.O. BOX 547608 P.O. BOX 547608 ORLANDO FL 32854 ORLANDO FL 32854 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 59-1228354 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RENE FERNANDEZ Street Address (P.O. Box Number is Not Acceptable) 1313 NEW TOWN AVE ORLANDO FL 32835 City 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 Signature, typed or printed name of ingistered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition RENE FERNANDEZ NAME STREET ADDRESS 1313 NEW TOWN AVE STREET ADDRESS CITY-ST-7IP ORLANDO FL CITY-ST-ZIP TITLE ST ☐ Delete TITLE ☐ Change ☐ Addition NAME MARIA FERNANDEZ NAME STREET ADDRESS 1313 NEW TOWN AVE STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZiP HitE ☐ Delete TITLE Change ☐ Addition NAM! NAME STREE1 ADDRESS STREET ADDRESS CHY-ST-7IP CITY-ST-7/P DILE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TOTLE ☐ Defete THEF □ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of trusted 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 the addless, with all other tike empowered. with all other like empowered

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ATTACHMENT \_ 50050442-2007 Edenfield Pl., Lakeland, Florida. 3380i Tel: (941) 665-5542 Fax: (941) 665-0775 1/15/05 Dear In/Madam: I have rever received notification this year to pay for the 2005 annual report fee. We have paid this fee on time for years. I am asking that you please waive the late charges. Enclosed is a check for \$150.00 Hark you - Sincerely Rere Jerrandy

President