

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2004 8:00 am
Secretary of State

09-13-2004 90011 011 ***550.00

DOCUMENT # 411041	
1. Entity Name STATE LIGHTING CO., INC.	

Principal Place of Business 405 4TH WAY WEST PALM BEACH, FL 33407 US	Mailing Address 405 4TH WAY WEST PALM BEACH, FL 33407 US
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2. Principal Place of Business 1387 N. Billman Drive	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Lake Park, FL	City & State
Zip 33403	Country



08312004 Chg-P CR2E034 (10/03)

4. FEI Number 59-1437768	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WEISBERG, PERRY 405 4TH WAY WPB, FL 33407	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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: Perry Weisberg - Perry Weisberg President DATE: 9/09/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-instating)

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD WEISBERG, PERRY 405 4TH WAY WEST PALM BEACH, FL 33407 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: Perry Weisberg DATE: 9/09/04 (504) 377-9529

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR