

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # 421497

1. Entity Name  
FILTERED PRODUCTS INC.



Principal Place of Business  
707 N.W. 6TH AVE  
FORT LADERDALE, FL 33311-7331

Mailing Address  
707 N.W. 6TH AVE  
FORT LADERDALE, FL 33311-7331

**FILED**  
**Apr 22, 2004 08:00 AM**  
**Secretary of State**



04182004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-1459883	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLLINS, MONROE JR  
410 SW 18 CT  
POMPANO BEACH, FL 33060

**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, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD COLLINS, MONROE JR 410 SW 18 CT. POMPANO BEACH, FL 33060
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD COLLINS, MONROE 410 SW 18 CT POMPANO BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COLLINS, MONROE 410 SW 18 CT POMPANO BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDS COLLINS, DIANA L 410 SW 18 CT POMPANO BEACH, FL 33060
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLINS, JEFFREY S 410 SW 18 CT POMPANO BEACH, FL 33060
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 all other like empowered.

SIGNATURE: *Monroe Collins, Jr* MONROE COLLINS, JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-04 (954) 462-1954

Date

Daytime Phone #