

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 08:00 AM
Secretary of State

DOCUMENT # 462711
 1. Entity Name
G.T. SANCHEZ & SON, INC.



Principal Place of Business 1113 15TH STREET RUSKIN, FL 33570	Mailing Address 1113 15TH STREET RUSKIN, FL 33570
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02142005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1555940	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

DUNCAN, ANDREW
 315 HYDE PARK AVE.
 TAMPA, FL 33606

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SANCHEZ, VAUGHN 1113 15TH ST RUSKIN, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SANCHEZ, VAUGHN 1113 15TH ST RUSKIN, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD SANCHEZ, MAXINE 1113 15TH ST RUSKIN, FL
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 02/16/05-80072-011 150.00

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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, trustee, or liquidator, or authorized representative, 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 officers and directors.

SIGNATURE: Vaughn Sanchez 2-14-05 813-645-1979
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #