

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 518536

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: STOLTZ INDUSTRIES, INC.

**Current Principal Place of Business:**

% CARL F. STOLTZ  
5932 S.W. 43 STREET  
DAVIE, FL 33314 US

**New Principal Place of Business:**

**Current Mailing Address:**

% CARL F. STOLTZ  
5932 S.W. 43 STREET  
DAVIE, FL 33314 US

**New Mailing Address:**

FEI Number: 59-1725208      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STOLTZ, CARL F  
6893 SW 194 AVE  
PEMBROKE PINES, FL 33332 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CARL F. STOLTZ,  
Address: 6893 SW 194 AVE.  
City-St-Zip: PEMBROKE PINES, FL 33332 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARL F. STOLTZ

PD

01/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date