2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 07, 2005 08:00 AM **DOCUMENT # 525196 Secretary of State** 1. Entity Name ARMSTRONGS' WESTERN TREND, INC. Principal Place of Business Mailing Address 6051-54TH AVENUE NORTH ST PETERSBURG FL 33709 6051-54TH AVENUE NORTH ST PETERSBURG FL 33709 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 59-1712837 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 Name PASSE, STEVEN Street Address (P.O. Box Number is Not Acceptable) 2923 LONGBROOK WAY **CLEARWATER FL 33760** 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 | am familiar with, and accept the obligations of registered agent SIGNATURE .. $S_{\rm QUalture}$, 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Added to Fees Trust Fund Contribution Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. lilite STD Addition Delete TOLE ☐ Change U00000253326 03/07/05-80028-008 150.00 PASSE, BEVERLY J NAME 2923 LONGBROOKE WAY STREET ADDRESS STREET ADOPESS CITY ST-ZIP CLEARWATER FL CITY STATE TiTLE ☐ Delete Addition | ☐ Change THE PASSE, STEVEN NAM STREET ADDRESS 2923 LONGBROOK WAY STREET ADDRESS CITY ST ZIP CLEARWATER FL 33760 ullY-SI-ZP DULE ☐ Delete DUCE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZiP CITY ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREE I ADDRESS STREET ADDRESS CITY ST-ZIP CHY-ST-ZP TITLE ☐ Delete THE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADURESS CHY ST-7IP CITY ST-ZIP HILE Delete HILE Change ☐ Addition NAME STRUET AUDRESS STREET ADDRESS CITY ST ZIP CiTY-ST-7/P

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(1), 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!

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BEVERLUJ. PASSE

3/4/05 727-544-6

FILED