

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 585316

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: HARDWARE CITY, INC.

## Current Principal Place of Business:

HARDWARE CITY, INC.  
1100 N UNIVERSITY DR  
PEMBROKE PINES, FL 33024 US

## New Principal Place of Business:

## Current Mailing Address:

C/O ROBERT E. GOGGIN III  
2020 N.W. 82ND AVENUE  
PEMBROKE PINES, FL 33024

## New Mailing Address:

FEI Number: 59-1841102      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GOGGIN, ROBERT E., III  
2020 N.W. 82ND AVENUE  
PEMBROKE PINES, FL 33024 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: DV ( ) Delete  
Name: ROBERT E GOGGIN, IV  
Address: 7760 NW 6 COURT  
City-St-Zip: PEMBROKE PINES, FL

Title: DST ( ) Delete  
Name: GOGGIN, JUDY L,  
Address: 2020 N W 82ND AVENUE  
City-St-Zip: PEMBROKE PINES, FL 00000,

Title: PD ( ) Delete  
Name: GOGGIN, ROBERT E, II, I  
Address: 2020 N W 82ND AVENUE  
City-St-Zip: PEMBROKE PINES, FL 00000,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT E. GOGGIN III, PRES

PD

01/06/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date