


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2005 08:00 AM
Secretary of State

DOCUMENT # 648654
 1. Entity Name
ST. PETE BEACH HARDWARE, INC.



Principal Place of Business Mailing Address
320 75TH AVENUE **320 75TH AVENUE**
ST PETERBURG BEACH, FL 33706 **ST PETERBURG BEACH, FL 33706**

DO NOT WRITE IN THIS SPACE



04122005 No Chg-P CR2E034 (10/03)

4. FEI Number **59-1956124** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
TYSKA, BARBARA E
320 75TH AVENUE
ST. PETERSBURG BEACH, FL 33706

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 _____ 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	T
NAME	TYSKA, BARBARA E
STREET ADDRESS	320 75TH AVE.
CITY-ST-ZIP	ST. PETERSBURG BCH, FL
TITLE	P
NAME	TYSKA, BARBARA E
STREET ADDRESS	320 75TH AVE.
CITY-ST-ZIP	ST. PETERSBURG BCH, FL
TITLE	S
NAME	TYSKA, BARBARA E
STREET ADDRESS	320 75TH AVE.
CITY-ST-ZIP	ST. PETERSBURG BCH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UD0000303565
 04/14/05-80008-007 150.00

DO NOT WRITE 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)(f), 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: Barbara E. Tyska 4-12-05 727-367-1959
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Barbara E. Tyska