


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90066 049 ***150.00

DOCUMENT # 680726 1. Entity Name POHL, INC.																											
Principal Place of Business C/O JAMES H. POHL 1413 S.W. 1ST AVENUE DEERFIELD BEACH, FL 33441		Mailing Address C/O JAMES H. POHL 1413 S.W. 1ST AVENUE DEERFIELD BEACH, FL 33441																									
2. Principal Place of Business 5072 NE 14th Terrace		3. Mailing Address 5072 NE 14th Terrace																									
Suite, Apt. #, etc.		Suite, Apt. #, etc.																									
City & State Pompano Bch FL		City & State Pompano Bch																									
Zip 33064-5706		Zip 33064-5706																									
Country USA		Country USA																									
4. FEI Number 59-2018477		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent POHL, JAMES H. 1413 S.W. 1ST AVENUE DEERFIELD BEACH, FL 33441 Pompano Bch, FL		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u><i>James Pohl</i></u> (NOTE: Registered Agent signature required when reinstating) DATE: _____																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
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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 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: <u><i>James Pohl</i></u> JAMES POHL <u>2/18/04</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Date</small> <small>Daytime Phone #</small>																											

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