


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 15, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 834367</b> 1. Entity Name <b>STEVCO OF ITHACA, INC.</b>		
Principal Place of Business <b>19111 COLLINS AVENUE, APT. #2602 SUNNY ISLES BEACH, FL 33160</b>	Mailing Address <b>19111 COLLINS AVENUE, APT. #2602 SUNNY ISLES BEACH, FL 33160</b>	



08122005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>16-0991701</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**SHULMAN, STEPHEN L  
19111 COLLINS AVENUE, APT. #2602  
SUNNY ISLES BEACH, FL 33160**

**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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P SHULMAN, STEPHEN L 19111 COLLINS AVENUE, APT. #2602 SUNNY ISLES BEACH, FL 33160</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S SHULMAN, KIM A 19111 COLLINS AVENUE, APT. #2602 SUNNY ISLES BEACH, FL 33160</b>
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08/15/05-R0001-006 150.00

**DO NOT WRITE  
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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:**  **STEPHEN L. SHULMAN** 8/12/05 5612813502  
Signature and typed or printed name of signing officer or director Date Daytime Phone #