


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2005 8:00 am
Secretary of State

07-13-2005 90012 049 ***158.75

DOCUMENT # F02000005337			
1. Entity Name BERTIN CO. INC.			
Principal Place of Business 3865 LAWRENCEVILLE HWY. STE. 101B LAWRENCEVILLE, GA 30044		Mailing Address 3865 LAWRENCEVILLE HWY. STE. 101B LAWRENCEVILLE, GA 30044	
2. Principal Place of Business <i>654 Bramlett Shoals Rd.</i>		3. Mailing Address <i>P.O. Box 148</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <i>Lawrenceville Georgia</i>		City & State <i>Litburn Georgia</i>	
Zip <i>30045</i>	Country <i>Gwinnett</i>	Zip <i>30048</i>	Country <i>Gwinnett</i>
4. FEI Number 58-1696330		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent AUGUSTE, MICHAEL W 10201 COVE LAKE DRIVE ORLANDO, FL 32836		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT BERTIN, GEORGE S 3865 LAWRENCEVILLE HWY. LAWRENCEVILLE, GA 30044 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <i>George S. Bertin</i>		7-11-2005 770-923-6812	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER, OFFICER OR DIRECTOR		Date Daytime Phone #	

20063102



07112005 Chg-P CR2E034 (10/03)