


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90323 050 ***150.00

DOCUMENT # F28466	
1. Entity Name CORAL SPRINGS VACUUM, INC.	

Principal Place of Business 2354 UNIVERSITY DRIVE CORAL SPRINGS FL 33065	Mailing Address 2354 UNIVERSITY DRIVE CORAL SPRINGS FL 33065
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2. Principal Place of Business 4683 N. UNIVERSITY DRIVE	3. Mailing Address 4683 N. UNIVERSITY DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State CORAL SPRINGS FLA	City & State CORAL SPRINGS FLA
Zip 33067	Zip 33067
Country	Country



1st MOORE CR2E034 (10/04)

4. FEI Number 59-2096549	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HENRY, ROBERT 2354 UNIVERSITY DR CORAL SPRINGS FL 33065	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4683 N. UNIVERSITY DRIVE City CORAL SPRINGS FL Zip Code 33067
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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
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HENRY, ROBERT 2354 UNIVERSITY DR CORAL SPRINGS FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4683 N. UNIVERSITY DRIVE CORAL SPRINGS FL 33067
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HENRY, SUSAN 2354 UNIVERSITY DR CORAL SPRINGS FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4683 N. UNIVERSITY DRIVE CORAL SPRINGS FL 33067
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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:  **ROBERT HENRY, Vice Pres** 4/22/05 752-3253
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #