

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2005 08:00 AM
Secretary of State

DOCUMENT # F47795

1. Entity Name
TYPING, ETC., INC.



Principal Place of Business
7310 W MCNAB RD
SUITE 206
TAMARAC, FL 33321 US

Mailing Address
7310 W MCNAB RD
SUITE 206
TAMARAC, FL 33321 US



01172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2152277

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOLTON, WILLIAM S
6981 NW 23RD STREET
MARGATE, FL 33063

**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 reinstating)

DATE

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

11111111234263
02/18/05-80014-007 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HOLTON, EDNA L
STREET ADDRESS 6981 NW 23RD ST
CITY-ST-ZIP MARGATE, FL 00000,

TITLE SD
NAME HOLTON, WILLIAM S
STREET ADDRESS 6981 NW 23RD ST
CITY-ST-ZIP MARGATE, FL 00000,

TITLE
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CITY-ST-ZIP

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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)(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: *Edna L. Holton, President* Edna L. Holton, President 2/15/05 954-726-3300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #