2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 14, 2005 08:00 AM **DOCUMENT # F93000000385 Secretary of State** 1. Entity Name FIREWOLF INDUSTRIES INC. Principal Place of Business Mailing Address 3500 S. FLORIDA AVE. 3500 S. FLORIDA AVE. STE. 2A STE. 2A LAKELAND, FL 33803 US LAKELAND, FL 33803 01312005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3145158 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE UTHOFF, DETLEFF 3500 SOUTH FLORIDA AVE **SUITE 2A** IN THIS SPACE LAKELAND, FL 33803 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 remediting) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. _ Added to Fees 10. OFFICERS AND DIRECTORS **PSTD** TITLE NAME UTHOFF, DETLEF 3500 SOUTH FLORIDA AVE., STE 2A STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33803 TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS City-51-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS Red Control of the Control CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 of those 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 an other like empowered. SIGNATURE: MONATURE AND TYPED OR PRINTED HAME OF MIGHING OFFICER OR DIRECTOR

FILED