

2005 FOR PROFIT CORPORATION ANNUAL REPORT

PA FILED
Mar 14, 2005 08:00 AM
Secretary of State
 BY: 6575
POSTED

DOCUMENT # F94000001884
 1. Entity Name
LOGUS MANUFACTURING CORP.



Principal Place of Business Mailing Address
1305 HILL AVE **1305 HILL AVE**
MANGONIA PARK, FL 33407 **MANGONIA PARK, FL 33407**

DO NOT WRITE IN THIS SPACE



01042005 No Chg-P CR2E034 (10/03)

4. FCI Number Applied For
11-1989802 Not Applicable
 5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
HACK, GEORGE S
1305 HILL AVE.
MANGONIA PARK, FL 33407

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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 _____ 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**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HACK, GEORGE S
STREET ADDRESS	1305 HILL AVE
CITY ST ZIP	MANGONIA PARK, FL
TITLE	S
NAME	HACK, THOMAS
STREET ADDRESS	1305 HILL AVE
CITY ST ZIP	MANGONIA PARK, FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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 03/14/05-80035-005 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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, without other being empowered.

SIGNATURE: _____ **3-9-05 (561) 842-3550**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR