

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 16, 2005 08:00 AM
Secretary of State

DOCUMENT # G10423

1. Entity Name
WALTER PETROVICH INTERNATIONAL CORPORATION



Principal Place of Business
**1100 SOUTH 56TH AVENUE
HOLLYWOOD, FL 33023**

Mailing Address
**1100 SOUTH 56TH AVENUE
HOLLYWOOD, FL 33023**



06062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2284344

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**PETROVICH, WALTER L
4810 HARRISON STREET
HOLLYWOOD, FL 33021**

**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
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$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

TITLE	D
NAME	PETROVICH, ANDREW D
STREET ADDRESS	4810 HARRISON ST
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	DP
NAME	PETROVICH, WALTER L
STREET ADDRESS	4810 HARRISON ST
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	DV
NAME	PETROVICH, AMY B
STREET ADDRESS	4810 HARRISON ST
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	D
NAME	PETROVICH, CHRISTOPHER J
STREET ADDRESS	4810 HARRISON ST
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	D
NAME	PETROVICH, RICHARD L
STREET ADDRESS	4810 HARRISON ST
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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06/16/05-80002-003 158.75

**DO NOT WRITE
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: *Walter L Petrovich*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 14, 2005
Date Daytime Phone #