

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H39861

Entity Name: PRESSMAN, INC.

FILED
Apr 07, 2005
Secretary of State

Current Principal Place of Business:

1700 NW 122 TERRACE
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

1700 NW 122 TERRACE
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 59-2495693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESSMAN, STEVEN
1700 NW 122ND TERRACE
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRESSMAN, STEVEN,
Address: 1700 NW 122 TERR
City-St-Zip: PEMBROKE PINES, FL

Title: D () Delete
Name: PRESSMAN, STEVEN,
Address: 1700 NW 122 TERR
City-St-Zip: PEMBROKE PINES, FL

Title: VP () Delete
Name: PRESSMAN, ISRAEL,
Address: 1700 NW 122 TERR.
City-St-Zip: PEMBROKE PINES, FL

Title: T () Delete
Name: PRESSMAN, LAURA
Address: 16953 NW 20TH ST
City-St-Zip: PEMBROKE PINES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN PRESSMAN

P

04/07/2005

Electronic Signature of Signing Officer or Director

Date