


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr-21, 2004 08:00 AM
Secretary of State

DOCUMENT # J32893
1. Entity Name
PALM BEACH FIRE SPRINKLER, INC.



Principal Place of Business Mailing Address
% MARSHALL P. RICHARDSON
6982 COUNTRY PLACE ROAD
WEST PALM BEACH, FL 33411 % MARSHALL P. RICHARDSON
6982 COUNTRY PLACE ROAD
WEST PALM BEACH, FL 33411

DO NOT WRITE IN THIS SPACE



04172004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2722677

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

6. Name and Address of Current Registered Agent
**RICHARDSON, MARSHALL PAUL
6982 COUNTRY PLACE ROAD
WEST PALM BEACH, FL 33411**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity suoms 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 corporations registered agent

SIGNATURE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution **\$5.00 May Be Added to Fees**

000000122060
04/21/04-80012-014 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	PD RICHARDSON, MARSHALL P. 6982 COUNTRY PLACE ROAD WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	VTS RICHARDSON, MARSHALL P. 6982 COUNTRY PLACE RD. WEST PALM BEACH, FL
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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)(c) Florida Statutes. I further certify that the information indicated on this report or subsequent reports 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 a power of attorney.

SIGNATURE: Marshall P. Richardson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR