

FILED
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Secretary of State

01-26-2005 90004 019 ***150.00

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # J84544

1. Entity Name
PAULMAR INVESTMENTS, INC.



Principal Place of Business
**241 E. PALMETTO PARK RD.
BOCA RATON, FL 33432 US**

Mailing Address
**8332 NW 80TH STREET
TAMARAC, FL 33321**

66003601



01192005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2840857

Applied For
☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**PINSKY, MARLENE
8332 NW 80TH STREET
TAMARAC, FL 33321**

**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
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
D
NAME
PINSKY, PAUL
STREET ADDRESS
8332 NW 80TH STREET
CITY-ST-ZIP
TAMARAC, FL 33321

TITLE
D
NAME
PINSKY, MARLENE
STREET ADDRESS
8332 NW 80TH STREET
CITY-ST-ZIP
TAMARAC, FL 33321

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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:

Marlene Pinsky **Marlene Pinsky** **2-22-05** **954-597-0165**
Signature and typed or printed name of officer or director Date Daytime Phone #