

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K08373

FILED
Apr 28, 2005
Secretary of State

Entity Name: ACTION TROPHIES AND AWARDS OF FLORIDA, STORE #1, INC.

Current Principal Place of Business:

% EDWARD A. ZUKOWSKI
976 NORTH FEDERAL HWY
POMPANO BEACH, FL 33062

New Principal Place of Business:

% EDWARD A. ZUKOWSKI
PO BOX 611486
POMPANO BEACH, FL 33061

Current Mailing Address:

% EDWARD A. ZUKOWSKI
976 NORTH FEDERAL HWY
POMPANO BEACH, FL 33062

New Mailing Address:

% EDWARD A. ZUKOWSKI
PO BOX 611486
POMPANO BEACH, FL 33061

FEI Number: 65-0027108

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUKOWSKI, EDWARD A.
976 N FEDERAL HWY
SUITE 132
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

ZUKOWSKI, EDWARD A.
PO BOX 611486
POMPANO BEACH, FL 33061 US

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: _____

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: ZUKOWSKI, EDWARD A.,
Address: 976 N FEDERAL HWY
City-St-Zip: POMPAN0 BEACH, FL 33062

Title: PD () Delete
Name: ZUKOWSKI, STEPHEN,
Address: 976 N FEDERAL HWY
City-St-Zip: POMPAN0 BEACH, FL 33062

Title: SD () Delete
Name: ZUKOWSKI, KATHERINE, E.
Address: 976 N FEDERAL HWY
City-St-Zip: POMPAN0 BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: ZUKOWSKI, EDWARD A.,
Address: PO BOX 611486
City-St-Zip: POMPAN0 BEACH, FL 33061

Title: PD (X) Change () Addition
Name: ZUKOWSKI, STEPHEN,
Address: PO BOX 611486
City-St-Zip: POMPAN0 BEACH, FL 33062

Title: SD (X) Change () Addition
Name: ZUKOWSKI, KATHERINE, E.
Address: PO BOX 611486
City-St-Zip: POMPAN0 BEACH, FL 33061

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: STEPHEN E ZUKOWSKI

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date