

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 04, 2004 8:00 am
Secretary of State

03-04-2004 90005 025 ***150.00

DOCUMENT # M20705

1. Entity Name

CONTRAX, INC.



Principal Place of Business

11457 MANATEE BAY LAKE
WELLINGTON FL 33467

Mailing Address

11457 MANATEE BAY LAKE
WELLINGTON FL 33467

2. Principal Place of Business

11457 MANATEE BAY LAKE

Suite, Apt. #, etc.

3. Mailing Address

11457 MANATEE BAY LAKE

Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

City & State

4. FEI Number

59-2686457

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOYAJIAN, CAROLE
8098 ROSEMARIE AVE WEST
BOYNTON BCH FL 33437

7. Name and Address of New Registered Agent

Name CAROLE BOYAJIAN

Street Address (P.O. Box Number is Not Acceptable)

11457 MANATEE BAY LAKE

City WELLINGTON

FL

Zip Code 33467

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, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VS ☐ Delete
NAME BOYAJIAN, CAROLE
STREET ADDRESS 8098 ROSEMARIE AVE WEST
CITY-ST-ZIP BOYNTON BCH FL

TITLE PTD ☐ Delete
NAME BOYAJIAN, KENNETH
STREET ADDRESS 8098 ROSEMARIE AVE W.
CITY-ST-ZIP BOYNTON BEACH FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11457 MANATEE BAY LAKE
CITY-ST-ZIP WELLINGTON, FL 33467

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11457 MANATEE BAY LAKE
CITY-ST-ZIP WELLINGTON, FL 33467

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Kenneth Boyajian

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH BOYAJIAN, PRES.

3/1/04

Date

561 793 5718

Daytime Phone #