


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005 08:00 AM
Secretary of State

DOCUMENT # M95248

1. Entity Name
 T.S.B., INC.



Principal Place of Business Mailing Address

4337 OKEECHOBEE BLVD. H3,4,5 4337 OKEECHOBEE BLVD. H3,4,5
 WEST PALM BEACH, FL 33409 WEST PALM BEACH, FL 33409

DO NOT WRITE IN THIS SPACE



01172005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0071037	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

EMPKE, WILLIAM, III
 77 MILESTONE WAY
 WEST PALM BEACH, FL 33463

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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 _____ (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 NAME STREET ADDRESS CITY-ST-ZIP	P EMPKE, WILLIAM, III 77 MILESTONE WAY WEST PALM BCH., FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP EMPKE, WILLIAM JR. 5112 WHITEWOOD WAY L.W., FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EMPKE, MARIE P. 77 MILESTONE WAY WEST PALM BEACH, FL
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 _____ 1/24/05 Date Daytime Phone # _____