

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 01, 2005 8:00 am**  
**Secretary of State**

04-01-2005 90006 004 \*\*\*150.00

**DOCUMENT # P00000072897**



1. Entity Name  
**INTERNATIONAL BUILDING PRODUCTS  
REPRESENTATIVES, INC.**

Principal Place of Business Mailing Address  
**C/O MARC H AUERBACH, ESQ  
201 S BISCAYNE BLVD, 20TH FLOOR  
MIAMI, FL 33131**

2. Principal Place of Business 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

01192005 Chg-P CR2E034 (10/03)

4. FEI Number **65-1056326** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**AUERBACH, MARC H ESQ  
201 S BISCAYNE BLVD, 20TH FLOOR  
MIAMI, FL 33131**

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 **DP** ☐ Delete  
NAME **RAMOS, MICHAEL A**  
STREET ADDRESS **749 TULIP CIRCLE**  
CITY-ST-ZIP **WESTON, FL 33327**

TITLE **DVP** ☐ Delete  
NAME **RAMOS, DAVID A**  
STREET ADDRESS **12159 SKYLARK DR.**  
CITY-ST-ZIP **WESTON, FL 33327**

TITLE **DS** ☐ Delete  
NAME **RAMOS, MARTA**  
STREET ADDRESS **1797 ASPEN LN**  
CITY-ST-ZIP **WESTON, FL 33327**

TITLE **DT** ☐ Delete  
NAME **RAMOS, DAVID**  
STREET ADDRESS **1797 ASPEN LN**  
CITY-ST-ZIP **WESTON, FL 33327**

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  
CITY-ST-ZIP

**DAVID A. Ramos** ☐ Change ☐ Addition  
**1259 SKYLARK Drive**  
**Weston, FL 33327**

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

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

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

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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/16/2005**  
Date Daytime Phone #