2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 11, 2005 8:00 am **DOCUMENT # P00000088055** Secrétary of State FLORIDA FOUNTAIN, INC. 07-11-2005 90118 007 ***150.00 Principal Place of Business Mailing Address 4132 SW 19TH PL P.O. BOX 15 03 40 CAPE CORAL, FL 33914 CAPE CORAL, FL 33915 2. Principal Place of Business 3. Mailing Address 4511 S.W. 7TH AVENUE 1408 S.E. 17TH AVENUE Suite, Apt. #, etc. Suite, Apt. #, etc. 07082005 Chg-P CR2E034 (10/03) SUITE F Applied For City & State City & State 4. FEI Number CAPE CORAL, FLORIDA CAPE CORAL, FLORIDA 65-1080783 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33914 33990 UŞA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VICTOR J. MAZZELLA SPEESE, SIGRID Street Address (P.O. Box Number is Not Acceptable) 16210 SADDLEWOOD LANE <u>1408 S.E. 17TH AVENUE</u> CAPE CORAL, FL 33991 SUITE F CAPE CORAL ^{Zio}£99°0 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. VICTOR J. MAZZELLA (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by September 7, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE D ☐ Defete TITLE ☐ Change ☐ Addition FEUCHTGRUBER, EVA NAME NAME STREET ADDRESS EICHENSTR, 13 STREET ADDRESS CITY-ST-ZIP HEMSBACH, GERMANY, 69502 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FEUCHTGRUBER, KARL NAME NAME EICHENSTR, 13 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HEMSBACH, GERMANY, 69502 CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

EVA FEUCHTGRUBER

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: 🗹

FILED

239-945-2260

Daytime Phone #

Date

ATTACHMENT

Florida Fountain Vne. 1408 S.E. 17th Avenue, Suite F Cape Coral, Florida 33990 (239) 772-2229

Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

July 8, 2005

RE: 2005 Uniform Business Report

Dear Sir or Madam:

Please abate the late filing penalty for our corporation, we did not receive the first and second notices, due to a changes in our address, management agent and registered agent.

Thank you for your consideration in this matter.

Very truly yours,

Eva Feuchtgruber, President