

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000093804

1. Entity Name
TURKISH CORP.



Principal Place of Business

2000 GLADES RD
STE 324
BOCA RATON, FL 33431

Mailing Address

2000 GLADES RD
STE 324
BOCA RATON, FL 33431



01202005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1045490

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COHEN, FRED C
712 US HIGHWAY ONE STE 400
NORTH PALM BEACH, FL 33408

**DO NOT WRITE
IN THIS SPACE**

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 reinstalling)

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

1100000201960
01/28/05-80088-013 79.38

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SPENCER, GILBERT
STREET ADDRESS	2000 GLADES RD, STE 324
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000201960
01/28/05-80088-014 79.37

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IN THIS SPACE**

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:

Gilbert Spencer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/05
Date

561-395-3536
Daytime Phone #