

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000114798

Entity Name: SOVINE SALES, INC.

FILED  
Sep 06, 2005  
Secretary of State

## Current Principal Place of Business:

3197 AUDRA ROAD  
ST AUGUSTINE, FL 32084

## New Principal Place of Business:

936 INDIAN RIVER RD.  
ST AUGUSTINE, FL 32092

## Current Mailing Address:

3197 AUDRA ROAD  
ST AUGUSTINE, FL 32084

## New Mailing Address:

936 INDIAN RIVER RD.  
ST AUGUSTINE, FL 32092

FEI Number: 59-3688249

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOVINE, BRET  
3197 AUDRA ROAD  
ST AUGUSTINE, FL 32084 US

## Name and Address of New Registered Agent:

SOVINE, BRET  
936 INDIAN RIVER RD.  
ST AUGUSTINE, FL 32092 US

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.

SIGNATURE:

09/06/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SOVINE, BRET  
Address: 3197 AUDRA ROAD  
City-St-Zip: ST AUGUSTINE, FL 32084

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SOVINE, BRET  
Address: 936 INDIAN RIVER RD.  
City-St-Zip: ST AUGUSTINE, FL 32092

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRET L. SOVINE

OWNE

09/06/2005

Electronic Signature of Signing Officer or Director

Date