

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000055603

1. Entity Name  
Y2K FABRICATION, INC.



**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

Principal Place of Business  
PO BOX 51713  
SARASOTA, FL 34232

Mailing Address  
PO BOX 51713  
SARASOTA, FL 34232



01112006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-1112346  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

MYERS, BRENT J  
3859 BEE RIDGE ROAD, SUITE 101  
SARASOTA, FL 34233

**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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

U00000548174  
05/12/06-80052-020 150.00

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
D  
PEREA, RANDALL  
STREET ADDRESS  
PO BOX 51713  
CITY - ST - ZIP  
SARASOTA, FL 34232

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 changed, or on an attachment with an address, with all other like employees.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-05-06 941-928-100  
Date Daytime Phone #