

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000093208

1. Entity Name
BUNKER ROAD INVESTMENTS, INC.



Principal Place of Business
**STE 101 444 BUNKER RD
W PALM BCH, FL 33405**

Mailing Address
**STE 101 444 BUNKER RD
W PALM BCH, FL 33405**



07262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1150297

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**KLEIN, BRENT D
801 BRICKELL AVE STE 1901
MIAMI, FL 33131**

**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: *Royce S. Allen*

Signature typed or printed name of registered agent and fee if applicable

NOTE: Registered Agent Signature required when constituting

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Initial Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	COLLINS, ROBERT S
STREET ADDRESS	STE 101 444 BUNKER RD
CITY-STATE-ZIP	W PALM BCH, FL 33405
TITLE	D
NAME	COLLINS, EULALIA
STREET ADDRESS	STE 101 444 BUNKER RD
CITY-STATE-ZIP	W PALM BCH, FL 33405
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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08/18/04-80001-005 150.00

**DO NOT WRITE
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: *Royce S. Allen*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #