

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90072 024 ***150.00

DOCUMENT # P01000108556					
1. Entity Name ECONOFILTERS, INC.					
Principal Place of Business 2280 NW 30 PLACE POMPANO BEACH, FL 33069			Mailing Address 2280 NW 30 PLACE POMPANO BEACH, FL 33069		
2. Principal Place of Business 3701 NE 12 Avenue Suite, Apt. #, etc.		3. Mailing Address 3701 NE 12 Avenue Suite, Apt. #, etc.			
City & State Pompano Beach, FL		City & State Pompano Beach, FL		4. FEI Number 65-1154779	
Zip 33064		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HORST, KIRK T 2280 NW 30 PLACE POMPANO BEACH, FL 33069			7. Name and Address of New Registered Agent Name: Dirk ter Horst Street Address (P.O. Box Number is Not Acceptable): 3701 NE 12 Avenue City: Pompano Beach FL Zip Code: 33064		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P NAME TER HORST, DIRK STREET ADDRESS 2280 NW 30 PLACE CITY-ST-ZIP POMPANO BEACH, FL 33069	<input type="checkbox"/> Delete		TITLE P NAME Dirk ter Horst STREET ADDRESS 3701 NE 12 Avenue CITY-ST-ZIP Pompano Beach, FL 33064	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP NAME LIPPOLD, HANS J STREET ADDRESS 2280 NW 30 PLACE CITY-ST-ZIP POMPANO BEACH, FL 33069	<input checked="" type="checkbox"/> Delete		TITLE S NAME Nicholas Stroud STREET ADDRESS 3701 NE 12 Avenue CITY-ST-ZIP Pompano Beach, FL 33064	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE S NAME STROUD, NICHOLAS STREET ADDRESS 2280 NW 30 PLACE CITY-ST-ZIP POMPANO BEACH, FL 33069	<input type="checkbox"/> Delete		TITLE T NAME Angel Rasendo STREET ADDRESS 3701 NE 12 Avenue CITY-ST-ZIP Pompano Beach, FL 33064	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE T NAME ROSENDO, ANGEL STREET ADDRESS 2280 NW 30 PLACE CITY-ST-ZIP POMPANO BEACH, FL 33069	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			2/10/05 954 977 5220 <small>Date Daytime Phone #</small>		

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