

2005 FOR PROFIT CORPORATION ANNUAL REPORT

06-27-2005 90002 029 ***150.00
P02000027715

DOCUMENT # P02000027715

1. Entity Name
PRO ACT INVESTMENTS INC.



FILED

05 JUL 19 AM 11:17

FOR FILING IN
TALLAHASSEE, FLORIDA J0003172

Principal Place of Business
879 NW 110 TER
PLANTATION, FL 33324

Mailing Address
879 NW 110 TER
PLANTATION, FL 33324



2. Principal Place of Business

3. Mailing Address

6101 Cheveland st lot E1
Suite, Apt. #, etc.
Lot E-1

6101 Cheveland st
Suite, Apt. #, etc.
Lot E1

06132005 Chg-P CR2E034 (10/03)

City & State
Hollywood, FL

City & State
Hollywood, FL

4. FEI Number
01-0631751

Applied For
Not Applicable

Zip
33024

Country
USA

Zip
33024

Country
USA

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

6. Name and Address of Current Registered Agent

LAMOTHE, FERNAND
879 NW 110 TER
PLANTATION, FL 33324

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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
Due by September 7, 2005

9. Election Campaign Financing
Trust 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	PS	<input type="checkbox"/> Delete
NAME	DUBOIS, ROBERT	
STREET ADDRESS	879 NW 110 TER	
CITY-ST-ZIP	PLANTATION, FL 33324	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert Dubois	
STREET ADDRESS	6101 Cheveland st lot E1	
CITY-ST-ZIP	Hollywood, FL 33024	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/05
Date

Daytime Phone #