

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90336 039 ***150.00

DOCUMENT # P02000034764	
1. Entity Name FROST INDUSTRIES, INC.	

Principal Place of Business 3951 BLENHEIM STREET FT MYERS, FL 33919	Mailing Address 3951 BLENHEIM STREET FT MYERS, FL 33919
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140000812

2. Principal Place of Business 235 Via Este	3. Mailing Address 235 Via Este
Suite, Apt. #, etc. #1602	Suite, Apt. #, etc. #1602

City & State Delray Beach, FL	City & State Delray Beach, FL
Zip 33445	Country USA



03252004 Chg-P CR2E034 (10/03)

4. FEI Number 01-0671886	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FROST, JON 3951 BLENHEIM STREET FT MYERS, FL 33919	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 235 Via Este #1602 City Delray Beach FL 33445
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FROST, JON 3951 BLENHEIM STREET FT MYERS, FL 33919	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Frost, Jon 235 Via Este #1602 Delray Beach, FL 33445
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: JON FROST - President Date: 03/30/04 (239) 890-3944