


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 16, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000041080</b> 1. Entity Name GEORGE A. TIBEDO, INC.		
Principal Place of Business 1214 NORTH K STREET LAKE WORTH, FL 33460	Mailing Address 1214 NORTH K STREET LAKE WORTH, FL 33460	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent  TIBEDO, GEORGE A 1214 NORTH K STREET LAKE WORTH, FL 33460		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>		
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<div style="display: flex; justify-content: space-between;"> <div> <b>\$5.00 May Be</b>  <b>Added to Fees</b> </div> <div style="text-align: right;">             1100000264721              03/16/05-80022-022 150.00           </div> </div>
<b>10. OFFICERS AND DIRECTORS</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVT TIBEDO, GEORGE A 1214 NORTH K STREET LAKE WORTH, FL 33460	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TIBEDO, LINDA R 1214 NORTH K STREET LAKE WORTH, FL 33460	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE 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)(f), 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.		
<b>SIGNATURE:</b> <u>George A. Tibedo</u> <b>GEORGE A. TIBEDO</b> <u>3-9-05</u> <u>561-533-5252</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		