

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jun 09, 2004 8:00 am
Secretary of State

5/1

05-18-2004 90002 005 ***150.00

DOCUMENT # P02000102201

1. Entity Name
PMP SALES, INC.



Principal Place of Business
2500 CORAL SPRINGS DRIVE #115
CORAL SPRINGS, FL 33065

Mailing Address
2500 CORAL SPRINGS DRIVE #115
CORAL SPRINGS, FL 33065

66427362



03302004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3751214

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PAPPALARDO, PASQUALE
2500 CORAL SPRINGS DRIVE #115
CORAL SPRINGS, FL 33065

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: *Pasquale M Pappalardo*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-7-04

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

10. OFFICERS AND DIRECTORS

TITLE D
NAME PAPPALARDO, PASQUALE
STREET ADDRESS 2500 CORAL SPRINGS DRIVE #115
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE D
NAME PAPPALORDO, PAT JR
STREET ADDRESS 2500 CORAL SPRINGS PL. #115
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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:

Pasquale M Pappalardo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

5-20-04