

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2004 8:00 am
Secretary of State

07-30-2004 90005 035 ***150.00

DOCUMENT # P02000103027

1. Entity Name
CANTEL HOMES, INC.



Principal Place of Business

**1219 GREYBROOKE PL
OLDSMAR, FL 34677**

Mailing Address

**1114 FLORIDA AVE STE B P.O. Box 895
PALM HARBOR, FL 34683 Tarpon Springs, FL
34688**

44050766



07072004 No Chg-P CR2E034 (10/03)

4. FEI Number **05-0532176** 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

**MATTHEWS, DOUGLAS A
1219 GREYBROOKE PL
OLDSMAR, FL 34677**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|-----------------|-----------------------|
| TITLE | PST |
| NAME | MATTHEWS, DOUGLAS A W |
| STREET ADDRESS | 1219 GREYBROOKE PL |
| CITY - ST - ZIP | OLDSMAR, FL 34677 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
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| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

**DO NOT WRITE
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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/21/04
Date

127-939-4111
Daytime Phone #

Attachment

Cantel Homes, Inc

PO Box 895
Tarpon Springs, FL 34688
(727) 939-4111 Fax: 945-8111

44050766
P02000103027

Wednesday, July 21, 2004

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

We recently received the attached completed annual report. Last February, our CPA submitted the UBR postcard so that we could receive the attached form and could file it on time. We never received that form.

As a result, I hope you will accept our payment of \$150 as timely and will abate the \$400 late filing fee for cause.

Thank you for your assistance in this matter.

Sincerely,

Doug Matthews, President