

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000043387

Entity Name: SAWGRASS SANITARY SUPPLIES, INC.

FILED  
Mar 18, 2005  
Secretary of State

## Current Principal Place of Business:

1525 NW 3RD STREET  
SUITE 2  
DEERFIELD BEACH, FL 33442

## Current Mailing Address:

1525 NW 3RD STREET  
SUITE 2  
DEERFIELD BEACH, FL 33442

## New Principal Place of Business:

4800 LYONS TECHNOLOGY PARKWAY  
SUITE 3  
COCONUT CREEK, FL 33073

## New Mailing Address:

4800 LYONS TECHNOLOGY PARKWAY  
SUITE 3  
COCONUT CREEK, FL 33073

FEI Number: 56-2353463

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OLMO, DAVID P SR  
10733 MAPLE CHASE DRIVE  
BOCA RATON, FL 33498 US

## Name and Address of New Registered Agent:

OLMO, DAVID P SR  
P O BOX 880252  
BOCA RATON, FL 33488 US

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.

SIGNATURE:

03/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OLMO, DAVID P SR.  
Address: 10733 MAPLE CHASE DRIVE  
City-St-Zip: BOCA RATON, FL 33498

Title: VP ( ) Delete  
Name: OLMO, DEBRA L  
Address: 10733 MAPLE CHASE DRIVE  
City-St-Zip: BOCA RATON, FL 33498

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: OLMO, DAVID P SR.  
Address: P O BOX 880252  
City-St-Zip: BOCA RATON, FL 33488

Title: VP (X) Change ( ) Addition  
Name: OLMO, DEBRA L  
Address: P O BOX 880252  
City-St-Zip: BOCA RATON, FL 33488

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID P OLMO SR

P

03/18/2005

Electronic Signature of Signing Officer or Director

Date