


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 15, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000063169**

1. Entity Name  
**1248 HOLDING CORP.**



Principal Place of Business      Mailing Address

**609 S.E. 13TH ST.  
 FORT LAUDERDALE, FL 33316    US**      **1236 S. FEDERAL HWY.  
 FORT LAUDERDALE, FL 33316    US**

**DO NOT WRITE IN THIS SPACE**



04112005    No Chg-P    CR2E034 (10/03)

4. FEI Number  
**41-2108504**      Applied For  
 Not Applicable

5. Certificate of Status Desired        **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**HARRELL, HARRY  
 20064 PALM ISLAND DRIVE  
 BOCA RATON, FL 33498**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable      (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P TORRENCE, GARY 7412 N.W. 51ST WAY COCONUT CREEK, FL 33073</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V HARRELL, HARRY 20064 PALM ISLAND DRIVE BOCA RATON, FL 33428</b>
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 04/15/05-800008-017 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: *[Signature]*      **4/13/05**      **954-445-1616**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #