

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071399

Entity Name: THE SUPPLY GUY, INC

FILED
Mar 15, 2005
Secretary of State

Current Principal Place of Business:

4811 LYONS TECHNOLOGY PARKWAY
3
COCONUT CREEK, FL 33073

New Principal Place of Business:

4800 LYONS TECHNOLOGY PARKWAY
3
COCONUT CREEK, FL 33073

Current Mailing Address:

10733 MAPLE CHASE DRIVE
BOCA RATON, FL 33498

New Mailing Address:

FEI Number: 87-0701154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: O () Change (X) Addition
Name: THOMPSON, JENNIFER M
Address: 21061 BLACK MAPLE LANE
City-St-Zip: BOCA RATON, FL 33428

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 JR

P

03/15/2005

Electronic Signature of Signing Officer or Director

_____ Date