

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90054 026 ***150.00

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1. Entity Name
CORE CAPITAL CORP.



Principal Place of Business
910 S.E. 4TH AVE.
POMPANO BEACH, FL 33060

Mailing Address
910 S.E. 4TH AVE.
POMPANO BEACH, FL 33060

2. Principal Place of Business
6550 N. Federal Hwy.

3. Mailing Address
4611 Travis ST.

Suite, Apt. #, etc.
Suite 200

Suite, Apt. #, etc.
APT. # 1408-B

City & State
Fort Lauderdale, Florida

City & State
Dallas, Texas

Zip
33308

Country
USA

Zip
75205

Country
USA

03132005

Chg-P

CR2E034 (10/03)

4. FEI Number

20-0130252

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALLEN, ROBERT S.
910 S.E. 4TH AVE.
POMPANO BEACH, FL 33060

7. Name and Address of New Registered Agent

Name Allen, Robert S.

Street Address (P.O. Box Number is Not Acceptable)

6550 N. Federal Hwy., Suite 200

City Fort Lauderdale

FL

Zip Code 33308

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 then it applies to

(NOTE: registered Agents signature required when resigning)

DATE

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 D ☐ Delete
NAME ALLEN, SCOTT
STREET ADDRESS 910 S.E. 4TH AVE.
CITY-ST-ZIP POMPANO BEACH, FL 33060

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME ALLEN, SCOTT
STREET ADDRESS 4611 Travis ST. #1408-B
CITY-ST-ZIP Dallas, Texas 75205

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 this 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:

Robert Scott Allen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-05

Date

214-738-5755

Daytime Phone #