


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 10, 2005 8:00 am**  
**Secretary of State**

03-10-2005 90145 032 \*\*\*150.00

**DOCUMENT # P03000085825**

1. Entity Name  
**DESHONG FRAMING & CARPENTRY, INC.**



Principal Place of Business  
**2567 PEPPER AVE  
 MELBOURNE, FL 32935**

Mailing Address  
**2567 PEPPER AVE  
 MELBOURNE, FL 32935**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

01272005 Chg-P CR2E034 (10/03)

City & State

4. FEI Number  
**76-0738601**

Applied For  
 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

**DESHONG, JEFFREY  
 2567 PEPPER AVE  
 MELBOURNE, FL 32935**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) 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**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE **DPST**  Delete  
 NAME **DESHONG, JEFFREY**  
 STREET ADDRESS **2567 PEPPER AVE**  
 CITY-ST-ZIP **MELBOURNE, FL 32935**

Change  Addition  
 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **1V**  Delete  
 NAME **GYNAN, JUSTIN**  
 STREET ADDRESS **2567 PEPPER AVE**  
 CITY-ST-ZIP **MELBOURNE, FL 32935**

Change  Addition  
 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **2VP**  Delete  
 NAME **MOLODKIN, VICTOR**  
 STREET ADDRESS **259 BAYSIDE LAKES**  
 CITY-ST-ZIP **PALM BAY, FL 32909**

Change  Addition  
 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

Delete  
 TITLE  
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Change  Addition  
 TITLE  
 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 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: *Jeff Deshong* **Jeffrey Deshong Pres** 1/27/05 <sup>(321)</sup> 751-9613

DATE: \_\_\_\_\_ DAYTIME PHONE #: \_\_\_\_\_