## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 14, 2005 08:00 AM Secretary of State DOCUMENT # P03000089737 FELBIN ENTERPRISES, INC. Mailing Address Principal Place of Business, 8188 SOUTH CORAL CIRCLE 8188 SOUTH CORAL CIRCLE NORTH LAUDERDALE, FL 33068 NORTH LAUDERDALE, FL 33068 CR2E034 (10/03) 01052005 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0173126 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Name and Address of Current Registered Agent DO NOT WRITE FELLER, JOSEPH N 8188 SOUTH CORAL CIRCLE NORTH LAUDERDALE, FL 33068 IN THIS SPACE 3. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida I am familiar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and little if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. **PST** шш FELLER, JOSEPH N NAME 8188 SOUTH CORAL CIRCLE STREET ADDRESS NORTH LAUDERDALE, FL 33068 CITY - ST - ZIP TITLE NAME U00000180855 STREET ADDRESS 01/14/05-80024-015 150.00 CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP 1ITLE NAME

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:

STREET ADDRESS CITY - ST - 7IP IIILE NAME STREET ADDRESS CITY-ST-ZIP

(954) 726-9078 Daylime Phone #

FILED