

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90386 033 ***150.00

DOCUMENT # P03000097865

1. Entity Name
PUERTO ISABELLA, INC.



Principal Place of Business
**3093 46 AVE N
ST PETERSBURG, FL 33714**

Mailing Address
**3093 46 AVE N
ST PETERSBURG, FL 33714**

14012399



2. Principal Place of Business

3. Mailing Address

01122005 Chg-P CR2E034 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**9741 International Court N.
St. Petersburg, FL 33716**

**c 9741 International Court N.
St. Petersburg, FL 33716**

4. FEI Number

20-1262092

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PRIDGEN, GRADY C III
3093 46 AVE N
ST PETERSBURG, FL 33714**

Name

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

9741 International Court N.

City

St. Petersburg, FL 33716

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

Signature, typed or printed name of registered agent and title if applicable.

(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

TITLE **PRID** ☐ Delete
NAME **GEN, GRADY C III**
STREET ADDRESS **3093 46 AVE N**
CITY-ST-ZIP **ST PETERSBURG, FL 33714**

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 **PRIDGEN, GRADY C III** ☒ Change ☐ Addition
NAME
STREET ADDRESS **9741 International Court N.**
CITY-ST-ZIP **St. Petersburg, FL 33716**

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

TITLE ☐ Change ☐ Addition
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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)(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 or other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #