

SUB CRAVERS

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 NOV -3 PM 2:32

DOCUMENT # P03000107682

1. Entity Name  
SUB CRAVERS, INC.



Principal Place of Business

1930 N.E. 103 STREET  
NO. MIAMI BEACH, FL 33160

Mailing Address

1930 N.E. 103 STREET  
NO. MIAMI BEACH, FL 33160

6252 Pembroke Rd

Miramar

FL 33023

2. Principal Place of Business

6252 Pembroke Rd  
Suite, Apt. #, etc.

3. Mailing Address

6252 Pembroke Rd  
Suite, Apt. #, etc.

City &amp; State

Miramar FL

City &amp; State

Miramar FL

33023  
Country US

33023  
Country US

06282004

Chg-P

CR2E034 (10/03)

4. FEI Number

861083512

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BIBBY, FRANK  
4801 N.W. 181 TERR.  
OPA LOCKA, FL 33055

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

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**  
**Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME BIBBY, FRANK  
STREET ADDRESS 4801 N.W. 181 TERR  
CITY-ST-ZIP OPA LOCKA, FL 33055

TITLE VSD  
NAME BIBBY, TERSA  
STREET ADDRESS 4801 N.W. 181 TERR  
CITY-ST-ZIP OPA LOCKA, FL 33055

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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: Frank C Bibby  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 31, 2004 205 621 6381  
Date Daytime Phone #