


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000113519 1. Entity Name STEVE THE HANDYMAN, INC.		
Principal Place of Business 1722 NW 35TH ST. OCALA, FL 34475	Mailing Address 1722 NW 35TH ST. OCALA, FL 34475	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent KOCAK, JEAN 5840 W. ANTHONY RD. OCALA, FL 34475		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOCAK, STEVE 1722 NW 35TH ST. OCALA, FL 34475	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KOCAK, JEAN 5840 W. ANTHONY RD. OCALA, FL 34475	
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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 all other like empowered.		
SIGNATURE: <u><i>Jeann Kocak</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>4-29-05</u> Daytime Phone # <u>352-368-2944</u>



04242005 No Chg-P CR2E034 (10/03)

4. FEI Number 36-4541487	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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**DO NOT WRITE
IN THIS SPACE**