2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR) -

ANNUAL REPORT (AR)					
DOCUMENT # P03000115143 1. Entity Name					FILED SECRETARY OF STATE DIVISION OF CORPORATIONS
JEFF PETHTEL, INC.					05 SEP 26 AM 11: 47
Principal Plac	e of Business	Mailing Address			-0 mm 4 /
		2035 LAURA LN WEST PALM BEACH FL 33415			
Principal Place of Business 3. Mailing Address				I KRUNDU ITI MUND ITIKI ONIN DESK DESEJ JURZI JIRET HIZEZ HEN MUNES ATKOOT TI IESE	
2 5 8 o Suite, Apt.	CEDARCHEST RD.	2580 Cenarc Suite, Apt. #, etc.			
WEST PAIM BOACH, FL. WEST PAIM BEACH, FL				۷.	2nd MOORE CR2E034 (5/05)
City & State		City & State			4. FEI Number 57-1192886 Applied For Not Applicable
Zip 33415	Country	Zip 33415	Country		5. Certificate of Status Desired S8.75 Additional Fee Required
פורככ	6. Name and Address of Current F	<u> </u>	USA_		7. Name and Address of New Registered Agent
PETHTEL JEFF 2580 CCDARCREST ROAD					
PETHTEL, JEFF 1100 S. FEDERAL HWY. BOYNTON BEACH FL 33435 Street Address (P.O. Box Number is Not Acceptable)					
			City	-	Tio Code
City W < ST PAIM B CACH FL Zip Code 33 4 / 5 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 above harmed entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE JEFF PeTHTeL PRec. Signature, typod or printed name of registered agant and talle if applicable (NOTE Registered Again Ignature required when reinstating) CATE					
FILE NOW!!! FEE IS \$550.00 DUE BY September 7, 2005 Make Check Payable to Florida Department of State S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00.					
10.	OFFICERS AND I		11.	1.00	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME	D PETHTEL, JEFF	☐ Delete	TITLE NAME	AR. 5	F Peth Tel
STREET ADDRESS CITY-ST-ZIP	1100 S. FEDERAL HWY. BOYNTON BEACH FL 33435		STREET ADDRESS	25	80 CEDARGREST ROAD
TITLE	BOTHTON BEACH PL 33433	Delete	CITY-ST-ZIP	we	ST PAIM BEACH, FL. 33415
NAME		_ Dolett	NAME		100060048221
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY ST-ZIP		09/28/0501051018 **150.00
TOTALE		☐ Delete	TITLE		Change Addition
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CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		Change Addition
NAME Street Address			NAME STREET ADDRESS		A Commendation of the Comment
CITY-ST-ZIP			CITY-ST-ZIP		09/29/05/17/19/19/19
NAME		Detete	TITLE NAME		Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE NAME		Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS CITY - ST - ZIP			STREET ADDRESS CITY-ST-ZiP		
12. I hereby	certify that the information supplied with	this filing does not qualify for the	■ he∡exemption sta	ted in Se	ction 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: JOHN DIFFE OF PRINTED NAME OF SIGNING OFFICER OF DIFFE OF DIFFE