2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2004 8:00 am
Secretary of State
03-22-2004 90065 019 ***150.00

3/22

| | · · · · · · · · · · · · · · · · · · · | ······ | | <u> </u> | | |
|---|--|--|---|---|---|--|
| Principal Place of Business 2103 DANFORTH CIRCLE | | Mailing Address 2103 DANFORTH CIRCLE | | CCA | 30062 | |
| PALM CITY, F | | PALM CITY, FL 3499 | | 1 004 | 9000t | |
| Principal Pl | a Nace of Business | 3. Malling Address | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | STILE BYTHE WEIGH CORNY STORE SET | NAT MARK IN IS IN NICES! IN INDI |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 01132004 Chg-P CR2E034 (10 | |
| City & State | e . | City & State | | 4. FEI Number 20 - /342/ | 66 | Applied For Not Applicable |
| Zip | Country | Zip | Country | 5. Certificate of Status | Desired | \$8.75 Additional Fee Required |
| | 6. Name and Address of Cur | rent Registered Agent | Name | 7. Name and Address | of New Registered | · |
| | ZCAN DR' | | | s (P.O. Box Number is Not A | locentable) | |
| | FORTH CIRCLE Y, FL 34990 | • | - Silver Address | S (1.0. DOX NOTICE) IS NOT | | |
| | i N | | City | | | Zip Code |
| \$ The above | named entity submits this stateme | ent for the number of changing | | tered agent or both in the | FL State of Elorida Lam | · <u> </u> |
| | Signature, typed or printed name of registered | 1 | OTE: Registered Agent eigneture requ | | · | |
| FILI | .E NOW!!! FEE IS \$150.00 | 9. Election Camp | | 5.00 May Be | | |
| After Ma | ay 1, 2004 Fee will be \$5 | 50.00 Trust Fund Co | ntribution. | dded to Fees | ED TO OFFICERS AND | DIRECTORS IN 44 |
| After M: | officers | | | 55.00 May Be dded to Fees ADDITIONS/CHANGE | ES TO OFFICERS AND | D DIRECTORS IN 11 |
| After Ma | ay 1, 2004 Fee will be \$5 | 50.00 Trust Fund Co | ntribution. A | dded to Fees | ES TO OFFICERS AND | |
| After Ma | OFFICERS D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | SO.00 Trust Fund Co | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP | dded to Fees | ES TO OFFICERS AND | ☐ Change ☐ Addition |
| After Ma | OFFICERS D SOLER, OZCAN DR 2103 DANFORTH CIRCLE | 50.00 Trust Fund Co | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | dded to Fees | ES TO OFFICERS AND | |
| After Ma | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE | SO.00 Trust Fund Co | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | dded to Fees | ES TO OFFICERS AND | ☐ Change ☐ Addition |
| After M: 10. TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE | SO.00 Trust Fund Co | T1. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE | dded to Fees | ES TO OFFICERS AND | ☐ Change ☐ Addition |
| After No. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | S0.00 Trust Fund Co AND DIRECTORS Delate Delate | TITLE NAME STREET ADDRESS CITY-ST-ZIP | dded to Fees | ES TO OFFICERS AND | ☐ Change ☐ Addition☐ Change ☐ Addition☐ |
| After Ma 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | S0.00 Trust Fund Co AND DIRECTORS Delete Delete | T1. TITLE NAME STREET ADDRESS CITY-ST-ZIP | dded to Fees | ES TO OFFICERS AND | Change Addition Change Addition Change Addition |
| After Ma 10. TITLE NAME STREET ADDRESS GITY- ST-ZIP TITLE NAME | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | S0.00 Trust Fund Co AND DIRECTORS Delate Delate | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | dded to Fees | ES TO OFFICERS AND | ☐ Change ☐ Addition☐ Change ☐ Addition☐ |
| After Ma 10. TITLE NAME STREET ADDRESS GITY-ST-ZIP 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 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | S0.00 Trust Fund Co AND DIRECTORS Delete Delete | T11. TITLE NAME STREET ADDRESS CITY-ST-ZIP | dded to Fees | ES TO OFFICERS AND | Change Addition Change Addition Change Addition |
| After Ma 10. TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | S0.00 Trust Fund Co AND DIRECTORS Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | dded to Fees | ES TO OFFICERS AND | Change Addition Change Addition Change Addition |
| After Ma 10. TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | SO.00 Trust Fund Co AND DIRECTORS Delete Delete | T11. TITLE NAME STREET ADDRESS CITY-ST-ZIP | dded to Fees | ES TO OFFICERS AND | ☐ Change ☐ Addition |
| After NI 10. TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | SO.00 Trust Fund Co AND DIRECTORS Delete Delete | T11. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME | dded to Fees | ES TO OFFICERS AND | ☐ Change ☐ Addition |
| After Ma 10. TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | Trust Fund Co AND DIRECTORS Delete Delete Delete | T1. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | dded to Fees | ES TO OFFICERS AND | Change Addition Change Addition Change Addition Change Addition |
| After Ma 10. TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS | D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | Trust Fund Co AND DIRECTORS Delete Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | dded to Fees | ES TO OFFICERS ANI | Change Addition Change Addition Change Addition Change Addition |
| After Ma 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP | officers. OFFICERS. D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | Trust Fund Co AND DIRECTORS Delate Delate Delate Delate diwith this filling does not qualify port is true and accurate and the | TITLE NAME STREET ADDRESS CITY-ST-ZIP TOT THE exemption stated in | ADDITIONS/CHANGE Section 119.07(3)(i), Floridhe same legal effect as if ma | a Statutes. I further ce | Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition |
| After Ma 10. TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP | officers. D SOLER, OZCAN DR 2103 DANFORTH CIRCLE PALM CITY, FL 34990 D SOLER, SAZIYE 2103 DANFORTH CIRCLE PALM CITY, FL 34990 | Trust Fund Co AND DIRECTORS Delete Delete Delete Delete Delete | T11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTHE NAME STREET ADDRESS CITY-ST-ZIP | ADDITIONS/CHANGE Section 119.07(3)(i), Floridhe same legal effect as if ma | a Statutes. I further ce ade under cath; that I lat my name appears | Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition |



Machement

66430062

1000 SE Monterey Commons Blvd. Suite 101 Stuart, Florida 34996 (772) 287-4110 PHONE (772) 287-4112 FAX www.hbkcpa.com

July 13, 2004

Florida Department of State **Division of Corporations** PO Box 1500 Tallahassee, FL 32302-1500

RE:

P03000117197

2103 Danforth Circle Palm City, FL 34990

Dear Sir or Madam:

Please find enclosed the following:

- Copy of the 2004 annual report for the above named entity
 - Copy of I-EIN notice from Internal Revenue Service

The letter received by Dr. Soler from your office dated March 25, 2004 requested a response by April 25, 2004. The letter stated that the annual report was being returned because an Employer Identification Number (EIN) was not provided. Due to miscommunication between several third party individuals including the Internal Revenue Service, Selcan, Inc. was not issued an EIN until July 9, 2004.

Because this report was originally filed with your office by the due date of May 1, 2004, we respectfully request that any associated penalties be abated as the company should not be penalized for the miscommunication between several outside parties.

If you have any questions concerning this matter, please contact us.

Sincerely,

Manager

THE SECTION WHEN IN them a respective of

a. Copy of hall scales there internal Rever a Service Enclosures of the 2 and among open for the all of samed criticy

F:\Data\Clients\Selcan, Inc\annual rpt cvr ltr.doc

Sandin Sohon 9A

66430062 AP03000117197



Internal Revenue Service

}

: 3

DEPARTMENT OF THE TREASURY

The Digital Daily

Federal Tax ID / EIN

This is your provisional Employer Identification Number:

ç

20-1342166

Today's Date is: July 09, 2004 GMT

You will receive a confirmation letter in U.S. mail within-fifteen days. The letter will also contain useful tax information for your business or organization.

If you have input any of the information on your application in error, please wait seven days and contact the EIN Toll Free area at 1-800-829-4933, Monday - Friday, 7:30am - 5:30pm. If you do not want to call, please make corrections on the letter you receive confirming your EIN and return it to the IRS.

If you are going to complete other on-line applications that require your Employer Identification Number(EIN) you can copy it by performing the following steps:

- 1) Use your mouse to highlight your EIN (blue number on top of page) by moving your pointer on top of the number.
- 2) Press the Ctrl key at the same time pressing the C key.

Once you copy your EIN you can paste it in the appropriate place by pressing the Ctrl key at the same time pressing the V key.

You may click on the buttons below for different print options or to fill out another Form SS-4.

Review and Print Form SS-4

Click <u>here</u> to return to the Internet Employer Identification Number landing (start) page.