

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117569

Entity Name: SOUTH PAW INDUSTRIES, INC.

FILED
Jan 18, 2005
Secretary of State

Current Principal Place of Business:

PO BOX 489
ST PETERSBURG, FL 33731

New Principal Place of Business:

Current Mailing Address:

PO BOX 489
ST PETERSBURG, FL 33731

New Mailing Address:

FEI Number: 20-0320738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESTINI, JOHN R
111 SECOND AVE NORTHEAST STE 1401
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LESTINI, JOHN R
Address: PO BOX 489
City-St-Zip: ST PETERSBURG, FL 33731

Title: DVP () Delete
Name: LENAS, GEORGE
Address: PO BOX 489
City-St-Zip: ST PETERSBURG, FL 33731

Title: DST () Delete
Name: SWEENEY, MICHAEL
Address: PO BOX 489
City-St-Zip: ST PETERSBURG, FL 33731

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL SWEENEY

DST

01/18/2005

Electronic Signature of Signing Officer or Director

_____ Date