

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000137752

**FILED  
Apr 27, 2005  
Secretary of State**

**Entity Name:** PETER L. ARONIN FINE WOODWORKING, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

5624 LAWTON DR.  
SARASOTA, FL 34233

**Current Mailing Address:**

**New Mailing Address:**

5624 LAWTON DR.  
SARASOTA, FL 34233

FEI Number: 57-1193830

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

ARONIN, PETER L  
4734 OLD FARM RD.  
SARASOTA, FL 34233 US

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

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ARONIN, PETER L  
Address: 4734 OLD FARM RD.  
City-St-Zip: SARASOTA, FL 34233

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: PETER L ARONIN

D

04/27/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date