

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90275 021 ***150.00

DOCUMENT # P03000145770

1. Entity Name

ANGELS FENCE, INC.



Principal Place of Business

19 SEVILLE ORANGE PATH
PALM COAST FL 32164

Mailing Address

19 SEVILLE ORANGE PATH
PALM COAST FL 32164

2. Principal Place of Business

1025 South Beach St

Suite, Apt. #, etc.

APT #219

City & State

Daytona Beach, FL

Zip

32114

Country

Volusia

3. Mailing Address

1025 South Beach St

Suite, Apt. #, etc.

APT #219

City & State

Daytona Beach, FL

Zip

32114

Country

Volusia



MOORE

CR2E034 (11/03)

4. FEI Number

56-2430874

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ACOSTA, ANGEL
19 SEVILLE ORANGE PATH
PALM COAST FL 32164

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

ACOSTA, Angel R.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: D ☐ Delete
NAME: ACOSTA, ANGEL
STREET ADDRESS: 19 SEVILLE ORANGE PATH
CITY-ST-ZIP: PALM COAST FL 32164

TITLE: ACOSTA, ANGEL ☐ Delete
NAME: ACOSTA, ANGEL
STREET ADDRESS: 1025 South Beach St
CITY-ST-ZIP: APT 219
Daytona Beach, FL 32114

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
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STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ACOSTA, ANGEL ☒ Change ☐ Addition
NAME: ACOSTA, ANGEL
STREET ADDRESS: 1025 South Beach St APT 219
CITY-ST-ZIP: Daytona Beach, FL 32114

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
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TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

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:

Angel R. ACOSTA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/04

Date

386-931-4511

Daytime Phone #