

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000149893

Entity Name: FLAGLER TUB REPAIR, INC.

FILED  
Feb 24, 2005  
Secretary of State

## Current Principal Place of Business:

12 HANOVER DR  
FLAGLER BCH, FL 32136

## New Principal Place of Business:

12 HANOVER DR  
FLAGLER BEACH, FL 32136 US

## Current Mailing Address:

12 HANOVER DR  
FLAGLER BCH, FL 32136

## New Mailing Address:

12 HANOVER DR  
FLAGLER BEACH, FL 32136 US

FEI Number: 65-1210665

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CIERI, SUSAN J  
12 HANOVER DR  
FLAGLER BCH, FL 32136 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: CIERI, SUSAN J  
Address: 12 HANOVER DR  
City-St-Zip: FLAGLER BCH, FL 32136

Title: D ( ) Delete  
Name: CIERI, ROGER L  
Address: 12 HANOVER DR  
City-St-Zip: FLAGLER BCH, FL 32136

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SUSAN J CIERI

DP

02/24/2005

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

\_\_\_\_\_  
Date