

2005 FOR PROFIT CORPORATION ANNUAL REPORT

3. **FILED**
Apr 18, 2005 8:00 am
Secretary of State

03-18-2005 90051 004 ***150.00

DOCUMENT # P03000151423 1. Entity Name VIRGLE R. SHEETS, INC.																																																																							
Principal Place of Business 18609 CEDAR DR WEST MIAMI, FL 33912 FT. MYERS			Mailing Address 18609 CEDAR DR WEST MIAMI, FL 33912 FT. MYERS																																																																				
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																				
City & State			City & State																																																																				
Zip		Country		4. FEI Number 20-0492497																																																																			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable																																																																			
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145																																																																							
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____																																																																							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$350.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 20%;">TITLE</td> <td style="width: 60%;">PSTD</td> <td style="width: 20%; text-align: right;">☐ Delete</td> <td style="width: 20%;">TITLE</td> <td style="width: 60%;"></td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>SHEETS, VIRGLE R.</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>18609 CEDAR DR WEST</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33912 FT MYERS</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td colspan="3" style="height: 40px;"> </td> <td colspan="3" style="height: 40px;"> </td> </tr> <tr> <td colspan="3" style="height: 40px;"> </td> <td colspan="3" style="height: 40px;"> </td> </tr> <tr> <td colspan="3" style="height: 40px;"> </td> <td colspan="3" style="height: 40px;"> </td> </tr> <tr> <td colspan="3" style="height: 40px;"> </td> <td colspan="3" style="height: 40px;"> </td> </tr> <tr> <td colspan="3" style="height: 40px;"> </td> <td colspan="3" style="height: 40px;"> </td> </tr> <tr> <td colspan="3" style="height: 40px;"> </td> <td colspan="3" style="height: 40px;"> </td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	PSTD	☐ Delete	TITLE		☐ Change ☐ Addition	NAME	SHEETS, VIRGLE R.		NAME			STREET ADDRESS	18609 CEDAR DR WEST		STREET ADDRESS			CITY-ST-ZIP	MIAMI, FL 33912 FT MYERS		CITY-ST-ZIP																																						
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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 807, 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: X Virgle R. Sheets Inc Virgle R. SHEETS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR X 3-15-05 239-267-9976																																																																							