## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000006901

Entity Name: OBSCENE GREEN, INC.

**FILED** Mar 03, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1172 S. DIXIE HWY. 5791 SW 74 TERR. #27

#461

CORAL GABLES, FL 33146 SOUTH MIAMI, FL 33143

**Current Mailing Address: New Mailing Address:** 

1172 S. DIXIE HWY. 5791 SW 74 TERR

#461

CORAL GABLES, FL 33146 SOUTH MIAMI, FL 33143

FEI Number: 20-0562436 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:

VOIGT, JUSTIN T VOIGT, JUSTIN T 1172 S. DIXIE HWY. 5791 SW 74 TERR

#461

CORAL GABLES, FL 33146 US SOUTH MIAMI, FL 33143 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:

03/03/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO ( ) Delete Title: CFO (X) Change ( ) Addition

VOIGT, JUSTIN VOIGT, JUSTIN Name: Name: 1172 S. DIXIE HWY., #461 5791 SW 74 TERR., #27 Address: Address: City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: SOUTH MIAMI, FL 33143

Title: CFO ( ) Delete Title: CFO (X) Change ( ) Addition

Name: CRUISE, ROBIN Name: CRUISE, ROBIN 1172 S. DIXIE HWY., #461 5791 SW 74 TERR., #27 Address: Address: CORAL GABLES, FL 33146 SOUTH MIAMI, FL 33143 City-St-Zip: City-St-Zip:

Title: Title: COO (X) Delete () Change () Addition

WILLIAMS, TOM Name: Name: 1172 S. DIXIE HWY., #461 Address: Address: City-St-Zip: CORAL GABLES, FL 33146 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: ROBIN CRUISE **CFO** 03/03/2005