

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2005 8:00 am
Secretary of State

02-25-2005 90145 034 ***150.00

DOCUMENT # P04000039637

1. Entity Name
EXECUTIVE TURBINES, INC.



Principal Place of Business
**C/O BARNETT ROBINSON JR PA
120 E PALMETTO PARK ROAD SITE 150
BOCA RATON, FL 33432**

Mailing Address
**C/O BARNETT ROBINSON JR PA
120 E PALMETTO PARK ROAD SITE 150
BOCA RATON, FL 33432**



2. Principal Place of Business
Executive Turbines, Inc

3. Mailing Address
9401 N.W. 106 St.

Suite, Apt. #, etc.
101

Suite, Apt. #, etc.
101

02222005 Chg-P CR2E034 (10/03)

City & State
Miami, Fl.

City & State
Miami, Fl.

4. FEI Number
20-0892582

Applied For
☐ Not Applicable

Zip
33178

Country
U.S.A.

Zip
33178

Country
U.S.A.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BARNETT ROBINSON, JR., P.A.
120 E PALMETTO PARK RD SUITE 150
BOCA RATON, FL 33432**

7. Name and Address of New Registered Agent

Name
Steve Lindsey

Street Address (P.O. Box Number is Not Acceptable)
10886 N.W. 9th Ct.

City
Plantation, Fl.

Zip Code
33324

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 *Steve Lindsey*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Add
President	Steve Lindsey	10886 N.W. 9th Ct.	Plantation, Fl. 33324	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Add
				<input type="checkbox"/> Change	<input type="checkbox"/> Add
				<input type="checkbox"/> Change	<input type="checkbox"/> Add
				<input type="checkbox"/> Change	<input type="checkbox"/> Add
				<input type="checkbox"/> Change	<input type="checkbox"/> Add
				<input type="checkbox"/> Change	<input type="checkbox"/> Add
				<input type="checkbox"/> Change	<input type="checkbox"/> Add

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 changed, or on an attachment with his address, with all other like empowered.

SIGNATURE: *Steve Lindsey*