

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000051322

1. Entity Name
E & S INDUSTRIES, INC.



Principal Place of Business
**2369 RALEIGH ST
HOLLYWOOD, FL 33020**

Mailing Address
**2369 RALEIGH ST
HOLLYWOOD, FL 33020**



01102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0902894

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SMITH, MARGERY
2369 RALEIGH ST
HOLLYWOOD, FL 33020**

**DO NOT WRITE
IN THIS SPACE**

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 Margery Smith Margery Smith 2-14-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **SMITH, RAYMOND FITZGERALD**
STREET ADDRESS **2369 RALEIGH ST**
CITY-ST-ZIP **HOLLYWOOD, FL 33020**

TITLE **STD**
NAME **SMITH, MARGERY**
STREET ADDRESS **2369 RALEIGH ST**
CITY-ST-ZIP **HOLLYWOOD, FL 33020**

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11000001441250
03/03/06-80030-006 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Margery Smith (Margery Smith) 2-14-06 954-927-8294
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #