## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 24, 2005 8:00 am Secretary of State

DOCL	MENT #	P0400007	1777	<u></u>			2-24-2005 900	-	50.00
DOCUMENT # P04000071777  1. Entity Name BENCHMARK RESTORATIONS, INC.					)				
Principal Plac	e of Business		Mailing Address	<del></del> _	<b>1</b>	7		~~~	
7505 HENRY STREET WEST MELBOURNE, FL 32904			PO BOX 500130 MALABAR, FL 32950						
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2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02222005	Chg-P	CR2E034 (10/0	03)	
City & State		City & State			4. FEI Number	72498	3.	Applied For	
Zip	C	Country	Zip	Cou	ntry	5. Certificate o	Status Desired		Additional
	6. Name and	Address of Curren	t Registered Agent			7. Name and A	ddress of New Reg		
					Name				
ODDO, JOSEPH JR 7505 HENRY STREET WEST MELBOURNE, FL 32904				Street Address (P.O. Box Number is Not Acceptable)					
	·				İ				
					City			FL Zip (	Code
	named entity sub tions of registered		for the purpose of cha	anging its registe	red office or regist	ered agent, or both	, in the State of Florid	da. I am familiar v	vith, and accept
SIGNATURE.	Signature, typed or prin	nted name of registered agen	nt and title if applicable,	(NOTE: Register	ed Agent signature require	ed when reinstating)		DATE	
		E IS \$150.00 se will be \$550		n Campaign Fina und Contribution		5.00 May Be Ided to Fees			
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indicated on firs report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 is changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

<u> 22.05</u>

321.484.4349