

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2005 8:00 am**  
**Secretary of State**

04-11-2005 90194 046 \*\*\*150.00

**DOCUMENT # P04000073503**

1. Entity Name  
**LAND CRUSHER 4X4, INC.**



Principal Place of Business  
**648 SE 2ND STREET  
DEERFIELD BEACH, FL 33441**

Mailing Address  
**648 SE 2ND STREET  
DEERFIELD BEACH, FL 33441**

**50036655**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03172005 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number

**20-1092953**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BLOSSER, TODD J  
4000 NW 24TH TERRACE  
BOCA RATON, FL 33431**

Name

**Blosser, Todd J**

Street Address (P.O. Box Number is Not Acceptable)

**1401 S. Federal Hwy #213**

City

**BOCA RATON**

**FL**

Zip Code

**33432**

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

**Todd Blosser**

**4-8-05**

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 P ☐ Delete  
NAME BLOSSER, TODD J  
STREET ADDRESS 4000 NW 24TH TERRACE  
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE V ☐ Delete  
NAME MOORE, TODD C  
STREET ADDRESS 648 SE 2ND STREET  
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME BLOSSER, TODD J  
STREET ADDRESS 1401 S. Federal Hwy #213  
CITY-ST-ZIP Boca Raton, FL 33432

TITLE ☒ Change ☐ Addition  
NAME Moore, Todd C  
STREET ADDRESS 1411 NE 40th Court  
CITY-ST-ZIP Pompano Beach FL 33064-6104

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

SIGNATURE:

**Todd C. Moore**

**4/8/05**

**(954) 675-3229**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #