

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

03-14-2005 90105 045 \*\*\*150.00  
P04000076097

DOCUMENT # P04000076097

1. Entity Name

FURY INTERNATIONAL INC.



Principal Place of Business

POST OFFICE BOX 5552  
KEY WEST FL 33045

Mailing Address

POST OFFICE BOX 5552  
KEY WEST FL 33045

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-1113090

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HALPERN, MICHAEL  
209 DUVAL STREET  
KEY WEST FL 33040

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME D  
STREET ADDRESS NORQUOW, PETER  
CITY- ST- ZIP POST OFFICE BOX 5552  
KEY WEST FL 33045

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME PETER NORQUOW  
STREET ADDRESS  
CITY- ST- ZIP

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

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

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10f2

05 JUL 11 AM 8:54

STATE OF FLORIDA  
DEPARTMENT OF STATE

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1st MOORE

CR2E034 (10/04)

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2 of 2

Fury International, Inc.  
P O Box 5552  
Key West, FL 33045

July 6, 2005

Florida Department of State  
Secretary of State  
Glenda E Hood  
Divisions of Corporations  
P O Box 6327  
Tallahassee, Florida 32314

Dear Ms. Hood,

We are in receipt of a "Notice of Intent to Dissolve" for our corporation document number P04000076097.

Upon receiving this notice, we called the Division of Corporations and learned that our Annual Report had been rejected because the FEIN had not been added. We also learned that a notice had been sent regarding the rejected Annual Report on March 22, 2005, but we did not receive this notice.

We are re-submitting this 2005 Annual Report with the required FEIN and ask that all penalties be removed and the corporation not be dissolved, as we were not aware of the rejection of the form.

Please review the enclosed information and correct our records to show an active corporation.

Sincerely,

