

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000119702

1. Entity Name
FLO-TOWN, INC.



Principal Place of Business
3113 NW 27TH AVE
POMPAÑO BEACH, FL 33069

Mailing Address
3113 NW 27TH AVE
POMPAÑO BEACH, FL 33069

2. Principal Place of Business

2923 Crestwood Terr.
Suite, Apt. #, etc.

3. Mailing Address

2923 Crestwood Terr.
Suite, Apt. #, etc.

City & State

Margate FL

City & State

Margate FL

Zip

33063

Country

USA

Zip

33063

Country

USA

09162005

Chg-P

CR2E034 (10/03)

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZIMMERMAN, STEPHEN L
737 E ATLANTIC BLVD
POMPAÑO BEACH, FL 33060

7. Name and Address of New Registered Agent

Name Ray Skop

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

2923 Crestwood Terr.

City Margate

FL

Zip Code

33063

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

Ray Skop

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

(NOTE: Registered Agent signature required when reinstating)

x 9/30/05

DATE

**FILE NOW!!! FEE IS \$150.00
Due by October 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME SKOP, RAY
STREET ADDRESS 3113 NW 27TH AVE
CITY-ST-ZIP POMPAÑO BEACH, FL 33060

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 D ☒ Change ☐ Addition
NAME Skop, Ray
STREET ADDRESS 2923 Crestwood Terr.
CITY-ST-ZIP Margate, FL 33063

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

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:

Ray Skop

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

x 9/30/05

Date

Daytime Phone #

FILED

05 OCT -4 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

