2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 20, 2005 8:00 am Secretary of State

| DOCUMENT # P04000127433 1. Entity Name CEDARHOUSE SPECIALTIES INC. | | | | | | 07-20-200 | 5 90025 03 | 5 ***15 | 8.75 | |
|---|---|--|-------------------------------|--|---------------------------------------|------------------------------|--------------------------------|--------------------------|---------------------------|--|
| Principal Place of Business Mailing Address | | | <u>l</u> | | | | | | | |
| 5298 BUCKHEAD CIRCLE Boca Raton, FL 33486 | | 5298 BUCKHEAD CIRCLE Boca Raton, FL 33486 | | | | | 50 | 0562 | 66 | |
| | | | | | | | | | | |
| 2. Principal P | Place of Business | 3. Mailing Address | Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 07182005 | Chg-P | CR2E034 | ŧ (10/03) | | |
| City & Stat | e NA | City & State | | , | 4. FEI Number | | -125 | | plied For t Applicable | |
| Zip | Country | Zip | Country | | 5. Certificate | of Status Desired | <u>1527</u> \$ | 8.75 Add | | |
| | 6. Name and Address of Current | Registered Agent | | | 7. Name and | Address of New | Registered Ag | ent | | |
| GRINDLE, JON G | | | | Name | | | | | | |
| 5298 BUCKHEAD CIRCLE BOCA RATON, FL 33486 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | | | | , | | |
| | | | City | | | | FL | Zip Cod | e | |
| 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. | | | | | | | | | | |
| (- (1) - M - to 6 () ind/ 2 7-17-15 | | | | | | | | | | |
| SIGNATURE. | Signature, typed or profeed name of registered agen | snd tale if applicable. (NOTE: | Registered Agent signs | cure required | (when rematating) | 7 45.00 | DATE | | | |
| FILE NOW!!! FEE IS \$150.00 9. Election Campaign Fir Trust Fund Contribution | | | , | | .00 May Be led to Fees | In accordance corporation di | with s. 607.1 d not receive | 93(2)(b), the prior r | F.S., the notice. | |
| 10. | OFFICERS AND | DIRECTORS | 11. | | ADDITIONS/ | CHANGES TO OF | FICERS AND D | DIRECTOR | S IN 11 | |
| TITLE | Р | ☐ Delete | IIITE | | | | | Change | ☐ Addition | |
| NAME STREET ADDRESS | GRINDLE, JON G 5298 BUCKHEAD CIRCLE | | NAME Street adoress | | | | | | | |
| CITY-ST-ZIP | BOCA RATON, FL 33486 | | | | | | | | | |
| TITLE | ST STARLYND | ☐ Delete | TITLE | | | | (| Change | ☐ Addition | |
| NAME Street Adoress | GRINDLE, STARLYN D 5298 BUCKHEAD CIRCLE | | NAME STREET ADDRESS | | | | | | | |
| City-St-ZIP | BOCA RATON, FL 33486 | | CITY-ST-ZIP | | | · | 7.50 | | | |
| NILE NAME | | ☐ Delete | TITLE NAME | 1 | | | 1 | Change | Addition | |
| STREET ADDRESS | | | STREET ADDRESS | | | | | | | |
| CTY-ST-ZIP | | | CTTY-ST-ZIP | ļ | | | | | · · <u>_ · · · ·</u> | |
| TITLE NAME | | ☐ Oclete | TITLE NAME | | | | t | Change | Addition | |
| STREET ADDRESS | | | STREET ADDRESS | | | | | | | |
| CITY-ST-ZIP | | F*** | CITY-ST-ZIP | | | | | 7.0 | CT A LPst | |
| name | | ☐ Delete | TITLE NAME | | | | i | Change | Addition | |
| STREET ADORESS | | | STREET ADDRESS | | | | | | | |
| Criy-Si-ZiP | | | CHY-SI-ZIP | | · · · · · · · · · · · · · · · · · · · | | | 7 On | T a serie | |
| TITLE NAME | | ☐ Delete | TITLE NAME | | | | i | Change | Addition | |
| STREET ADDRESS CATY-ST-ZIP | | | STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| | certify that the information supplied wit | h this filing does not qualify for | | ted in So | action 119 07(3) | i) Florida Statutor | L further cortif | u that the i | formation | |

included on this report or supplied with this filling does not quality 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 eath; 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:

NTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR GIRECTOR

#17040001271433 50056266

June 17, 2005

Florida Department of State Division of Corporations Annual Report Section P.O. Box 6850 Tallahassee, Fl. 32314

Re: \$400 late fee

Dear Sirs: We are requesting a waiver of the \$400.00 late, because we did not receive the original notice until June, 2005, more than 40 days after the May 1, 2005 deadline. Ceadarhouse Specialties Inc. is a new corporation in 2004, making this the first time for an annual renewal.

PEI 77.0644125

Please find an enclosed check for the regular \$150.00 fee.

We appreciate your help in this matter.

Thank you,

Jon Grindle President

Cedarhouse Specialties Inc. 5298 Boca Raton, Fl. 33486

561-702-9927

jonstar@bellsouth.net