## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 28, 2005 08:00 AM Secretary of State DOCUMENT # P93000025757 1. Entity Name BENÉFICIAL PRODUCTS EAST, INC. Principal Place of Business Mailing Address 6431 LAKELAND HIGHLANDS RD POB 1168 LAKELAND, FL 33813 HIGHLAND CITY, FL 33849-1168 No Chg-P 04022005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3188553 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TAFT, WILLIAM K JR DO NOT WRITE 6431 LAKELAND HIGHLANDS RD LAKELAND, FL 33813 IN THIS SPACE 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 reinstating) TATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS D TITLE NAME TAFT, WILLIAM K JR <u> 1</u>000000340700 04/28/05-80128-011 150.00 STREET ADDRESS 6431 LAKELAND HIGHLANDS RD CITY-ST-ZIP LAKELAND, FL 33813 VP TITLE TAFT BARBARA C NAME STREET ADDRESS 6431 LAKELAND HIGHLANDS RD CITY-ST-ZIP LAKELAND, FL 33813 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

**FILED** 

12. I hereby certify that the information supplied with this filling 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.jf. changed, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP