

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 17, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000046692	
1. Entity Name CORROSION RESTORATION TECHNOLOGIES, INC.	
Principal Place of Business 1562 PARK LANE SOUTH SUITE 700 JUPITER, FL 33458 US	Mailing Address 1562 PARK LANE SOUTH SUITE 700 JUPITER, FL 33458 US



01052005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0421663	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

COSTA, JORGE
1562 PARK LANE SOUTH
SUITE 700
JUPITER, FL 33458

**DO NOT WRITE
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) 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 NAME STREET ADDRESS CITY-ST-ZIP	DP COSTA, JORGE 4435 RIVER PINES CT. TEQUESTA, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVTS RESTLY, MICHAEL W 11557 175TH PL. NORTH JUPITER, FL 33478
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BLOHM, GRANT 7417 ADAMOOR COURT MOBILE, AL 36695
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIPMAN, DAVID 237 UPPER MOUNTAIN AVE UPPER MONTCLAIR, NJ 07043
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000232726
02/17/05-80015-010 150.00

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE: FRANK J. SALVIA 2/15/05 561.744-225.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #