

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 8:00 am
Secretary of State

01-18-2005 90106 005 ***150.00

DOCUMENT # P93000064838

1. Entity Name
SHARP TURNING INC.



Principal Place of Business
**2900 46TH AVE W.
BRADENTON, FL 34207 US**

Mailing Address
**2900 46TH AVE W.
BRADENTON, FL 34207 US**

50003296



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

01052005 Chg-P CR2E034 (10/03)

City & State

4. FEI Number
65-0440330

Applied For
Not Applicable

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HIGGINS, BRIAN
2900 46TH AVE W.
BRADENTON, FL 34207**

7. Name and Address of New Registered Agent

Name **Bruce Higgins**
Street Address (P.O. Box Number is Not Acceptable)
6314 209th Street E
City **Bradenton** FL Zip Code **34211**

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 **Bruce Higgins - President** **1/12/05**
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 **P** ☒ Delete
NAME **HIGGINS, BRIAN**
STREET ADDRESS **5604 16 ST W**
CITY-ST-ZIP **BRADENTON, FL**

TITLE **V** ☐ Delete
NAME **HIGGINS, BRUCE**
STREET ADDRESS **5316 16 ST W**
CITY-ST-ZIP **BRADENTON, FL** **change**

TITLE **T** ☐ Delete
NAME **HIGGINS, MIKE**
STREET ADDRESS **5604 16TH ST. W.**
CITY-ST-ZIP **BRADENTON, FL** **change**

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
STREET ADDRESS
CITY-ST-ZIP

TITLE **President + Director** ☒ Change ☐ Addition
NAME **Bruce Higgins**
STREET ADDRESS **6314 209th Street E.**
CITY-ST-ZIP **Bradenton, FL 34211**

TITLE **Mike Higgins** ☒ Change ☐ Addition
NAME **5828 21st Street W.**
STREET ADDRESS **Bradenton, FL 34207**
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: **Bruce Higgins - President** **1/12/05** **941-751-9103**
Signature and typed or printed name of signing officer or director Date Daytime Phone #