

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 05, 2007 8:00 am
Secretary of State

03-28-2007 90019 011 ***150.00

DOCUMENT # P93000081853 1. Entity Name BOB PRATT ENTERPRISES, INC.																																																																																																					
Principal Place of Business 3740 NE 24TH AV LIGHTHOUSE POINT FL 33064				Mailing Address 3740 NE 24TH AV LIGHTHOUSE POINT FL 33064																																																																																																	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																																																																																																			
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																			
City & State		City & State		4. FEI Number 65-0457113 ☐ Applied For ☐ Not Applicable																																																																																																	
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																	
8. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent																																																																																																	
PRATT, ROBERT 3740 NE 24TH AVE LIGHTHOUSE POINT FL 33064				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 																																																																																																	
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: <i>Robert Pratt</i> 3/16/07 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, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ☐ Added to Fees																																																																																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 10%; padding: 2px;">TITLE</td> <td style="width: 60%; padding: 2px;">NAME</td> <td style="width: 30%; padding: 2px;">☐ Delete</td> <td style="width: 10%; padding: 2px;">TITLE</td> <td style="width: 60%; padding: 2px;">NAME</td> <td style="width: 30%; padding: 2px;">☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2" style="padding: 2px;">PRATT, ROBERT</td> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2" style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY ST ZIP</td> <td colspan="2" style="padding: 2px;">3740 NE 24TH AVE LIGHTHOUSE POINT FL 33064</td> <td style="padding: 2px;">CITY ST ZIP</td> <td colspan="2" style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">☐ Delete</td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2" style="padding: 2px;">PRATT, ELAYNE</td> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2" style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY ST ZIP</td> <td colspan="2" style="padding: 2px;">3740 NE 24TH AVE LIGHTHOUSE POINT FL 33064</td> <td style="padding: 2px;">CITY ST ZIP</td> <td colspan="2" style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">☐ Delete</td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2" style="padding: 2px;"></td> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2" style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY ST ZIP</td> <td colspan="2" style="padding: 2px;"></td> <td style="padding: 2px;">CITY ST ZIP</td> <td colspan="2" style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">☐ Delete</td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2" style="padding: 2px;"></td> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2" style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY ST ZIP</td> <td colspan="2" style="padding: 2px;"></td> <td style="padding: 2px;">CITY ST ZIP</td> <td colspan="2" style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">☐ Delete</td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2" style="padding: 2px;"></td> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2" style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY ST ZIP</td> <td colspan="2" style="padding: 2px;"></td> <td style="padding: 2px;">CITY ST ZIP</td> <td colspan="2" style="padding: 2px;"></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	PRATT, ROBERT		STREET ADDRESS			CITY ST ZIP	3740 NE 24TH AVE LIGHTHOUSE POINT FL 33064		CITY ST ZIP			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	PRATT, ELAYNE		STREET ADDRESS			CITY ST ZIP	3740 NE 24TH AVE LIGHTHOUSE POINT FL 33064		CITY ST ZIP			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			STREET ADDRESS			CITY ST ZIP			CITY ST ZIP			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			STREET ADDRESS			CITY ST ZIP			CITY ST ZIP			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			STREET ADDRESS			CITY ST ZIP			CITY ST ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <i>Robert Pratt</i> 4/2/07 954-971-1174 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																																																																																					