

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000003582

Entity Name: CEBEDO & COMPANY, INC.

FILED  
May 01, 2005  
Secretary of State

**Current Principal Place of Business:**

14022 80TH AVENUE NORTH  
SEMINOLE, FL 33776 US

**New Principal Place of Business:**

**Current Mailing Address:**

14022 80TH AVENUE NORTH  
SEMINOLE, FL 33776 US

**New Mailing Address:**

FEI Number: 59-3219973      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CEBEDO, ROSALINDA S  
14022 80TH AVENUE NORTH  
SEMINOLE, FL 34646 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: V      ( ) Delete  
Name: CEBEDO, ALEJANDRO C  
Address: 34 ESTATE SHOYS  
City-St-Zip: CHRISTIANSTED, ST. CROX, US 00824

Title: ST      ( ) Delete  
Name: WALSH, MARIE L  
Address: 4719 17TH ST. SOUTH  
City-St-Zip: ST PETERSBURG, FL 33711

Title: P      ( ) Delete  
Name: CEBEDO, ROSALINDA S  
Address: 14022 80TH AVENUE NORTH  
City-St-Zip: SEMINOLE, FL 33776

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSALINDA S. CEBEDO

PRES

05/01/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date