

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

APPROVED
AND
FILED

8/16/2005-90041-031-\$150.00-\$150.00

05 NOV 29 PM 1:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000014187																											
Entity Name FLORIDA STREET DREAMS, INC.																											
Principal Place of Business 825 SE. MONTEREY RD, STE #2 STUART FL 34994		Mailing Address 825 SE. MONTEREY RD, STE #2 STUART FL 34994																									
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Succ. Apt. #, etc.		Succ. Apt. #, etc.																									
City & State		City & State																									
Zip	Country	Zip	Country																								
4. FEI Number 65-0469069		Applied For ☐ Additional Fee Required																									
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent BARTHOLOMEW, MONICA 920 S. DIXIE HWY STUART FL 34997		7. Name and Address of New Registered Agent Name: Chet Bartholomew Street Address (P.O. Box Number is Not Acceptable) 5315 SE. Monterey Rd. City: Stuart FL 34994																									
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: 		DATE:																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fee																									
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																									
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 		Date: 8-9-05 772-286-9171																									

K. Eckel NOV 29 2005

2/2

Nov. 12, 2005

Florida Dept. of State

Subject: waiver of reinstatement fee

We did not receive the original / second notice of the annual report. We were hit with Hurricane Francis & Jeanne and also Wilma shutting our business down due to roof damages and etc. We are under Restricted Use Order as of 10-26-2005 and request waiver of reinstatement fees. Please consider our request for reinstatement.

Florida Street Dreams,

