2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000022401

1. Entity Name

J & S SPRINKLER DESIGN, INC.



FILED
Jan 20, 2005 08:00 AM
Secretary of State

Principal Place of Business

6761 MCKINLEY STREET HOLLYWOOD, FL 33024

Mailing Address

6761 MCKINLEY STREET HOLLYWOOD, FL 33024



DO NOT WRITE IN THIS SPACE

01102005 No Chg-P CR2E034 (10/03)

4. FEI Number | Applied For | Not Applied be | Not Appli

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLLINS, JOHN J 6761 MCKINLEY STREET HOLLYWOOD, FL 33024

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 (fapplicable, (NOTE Registe	red Agent signature	required when reinstaling)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS .			1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLINS, JOHN J 6761 MCKINLEY STREET HOLLYWOOD, FL 33024				U00000186320 U1/21/05-80052-004 150.00
TITLE NAME STREET ADDRESS DITY-ST-ZIP	D COLLINS, SANDRA L 6761 MCKINLEY STREET HOLLYWOOD, FL 33024		,		01/21/05-80052-004 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE 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.

SIGNATURF:

1-12-05