

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 04, 2005 8:00 am**  
**Secretary of State**

03-04-2005 90067 007 \*\*\*150.00

**DOCUMENT # P95000022367**

1. Entity Name

EVER CHANGING TIMES, INC.



Principal Place of Business

17855 US HWY 441  
6  
MOUNT DORA FL 32757  
US

Mailing Address

17855 US HWY 441  
6  
MOUNT DORA FL 32757  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/04)

4. FEI Number  
**59-3304650**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

PEREZ, RICARDO  
17855 US HWY 441 #6  
MOUNT DORA FL 32757

7. Name and Address of New Registered Agent

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

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**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE CEO ☐ Delete  
NAME PEREZ, RICARDO  
STREET ADDRESS 17855 US HWY 441  
CITY-ST-ZIP MOUNT DORA FL 32757

TITLE P ☒ Delete  
NAME ROSEDALT, RIM  
STREET ADDRESS 17855 US HWY 441 # 6  
CITY-ST-ZIP MOUNT DORA FL 32757

TITLE ST ☐ Delete  
NAME MICKERBEAS, ADAM  
STREET ADDRESS 17855 US HWY 441 # 6  
CITY-ST-ZIP MOUNT DORA FL 32757

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 President, CEO, Director ☒ Change ☐ Addition  
NAME PEREZ, RICARDO  
STREET ADDRESS 17855 U.S. HWY 441 #6  
CITY-ST-ZIP MOUNT DORA, FL 32757

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Secretary, Treasurer, Director ☒ Change ☐ Addition  
NAME MICKENBERG, ADAM  
STREET ADDRESS 17855 US HWY 441 #6  
CITY-ST-ZIP MOUNT DORA FL 32757

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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/29/05 350-385-591