2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: 🗓

Feb 25, 2005 08:00 AM DOCUMENT # P95000049637 **Secretary of State** 1. Entity Name PEARCE BROTHERS CORPORATION Principal Place of Business Mailing Address 4801 NE 1ST TERR FT. LAUDERDALE FL 33334 4801 NE 1ST TERR FT. LAUDERDALE FL 33334 3. Mailing Address 2. Principal Place of Business Suite Apt # etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State Applied For City & State 4. FEi Number 65-0603513 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PEARCE, HARRY D Street Address (P.O. Box Number is Not Acceptable) 4801 NE 1ST STREET FT. LAUDERDALE FL 33334 Zip Code City FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signalure required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Change Addition PD ☐ Delete TITLE tuué PEARCE, HARRY D NAME U00000242587 02/25/05-80005-011 150.00 STREET ADDRESS STREET ADDRESS 4801 NE 1ST TERR CITY-ST-ZIP FT. LAUDERDALE FL 33334 CHY-ST-ZIP Addition Change VD ☐ Delete Ittlé DITLE HOWARD, JOHN W A/A ME NAME STREET ADDRESS STREET ADDRESS 4400 PINEWOOD CIRCLE CITY-ST-ZIP BURTON SC 29906 CITY-ST-ZIP Change Addition ☐ Delete 3,1111 TITLE NAME PEARCE, CINDY S STREET ADDRESS STREET ADDRESS 4801 NE 1ST TERR CHTY-ST-ZIP C11Y-S1-2IP FT. LAUDERDALE FL 33334 Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CLEY-ST-ZIP CITY: ST-7(P ☐ Addition TOTALE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change Addition 1:TLE NAME STREET ADDRESS STREET ADDRESS CHY-SI-JIP 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.

HARRY D PEARCE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

(954) 258-0600