

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P95000073796

1. Entity Name  
VAGABOND, INC.



Principal Place of Business

801 SEABREEZE BLVD.  
FORT LAUDERDALE, FL 33316

Mailing Address

801 SEABREEZE BLVD.  
FORT LAUDERDALE, FL 33316

**FILED**  
**Mar 29, 2005 08:00 AM**  
**Secretary of State**



03102005 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0622432

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

SUHYDA, EDWARD  
801 SEABREEZE BLVD.  
FORT LAUDERDALE, FL 33316

**DO NOT WRITE  
IN THIS SPACE**

3. 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**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
SUHYDA, EDWARD  
2470 S.W. 28TH TERRACE  
FORT LAUDERDALE, FL 33312

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
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CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 life empowered.

SIGNATURE:

EDWARD SUHYDA

03/15/2005 954-581-2666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #