

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000082375

1. Entity Name
8048 CORP.



Principal Place of Business

13031 B 92ND ST NO.
508B
LARGO, FL 33773-1320 US

Mailing Address

8048 93 STREET N
SEMINOLE, FL 33777-4024 US

FILED

05 SEP 22 PM 2:53

SECRET
DATE
FALL 2005



08202005 No Chg-P CR2E034 (10/03)

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4. FEI Number
59-3341668

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MEYER, JOHN J
8048 93 STREET N
SEMINOLE, FL 33777-4024

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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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

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
P
MEYER, JOHN J.
8048 93RD STREET NORTH
SEMINOLE, FL 337774024

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
MEYER, LUCILLE K.
8048 93RD STREET NORTH
SEMINOLE, FL 337774024

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

200060126352
10/03/05--01003--017 *\$558.75

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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)(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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sept. 19, 2005

Date

727 SPA 7959

Daytime Phone