

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2005 8:00 am
Secretary of State

02-04-2005 90052 037 ***158.75

DOCUMENT # P95000083019

1. Entity Name

CONSULTANT AND TECHNICAL SERVICES, INC.



Principal Place of Business

17851 NE STATE ROAD 121
WILLISTON FL 32926
US

Mailing Address

P.O. BOX 943
WILLISTON FL 32696
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3355200

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STEVENS, DANNY H
17851 N.E. ST. ROAD 121
WILLISTON FL 32696

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 DP ☐ Delete
NAME STEVENS, DANNY H
STREET ADDRESS 17851 N.E. STATE RD. 121
CITY-ST-ZIP WILLISTON FL 32696

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 PRES. ☐ Change ☐ Addition
NAME DANNY H. STEVENS
STREET ADDRESS 17851 NE ST RD 121
CITY-ST-ZIP WILLISTON FL 32696

TITLE VICE PRES. ☐ Change ☒ Addition
NAME MATVEJS, MIAN J.
STREET ADDRESS 17851 NE ST RD 121
CITY-ST-ZIP WILLISTON FL 32696

TITLE TRES. ☐ Change ☐ Addition
NAME STEVENS, DANNY H.
STREET ADDRESS 17851 NE ST RD 121
CITY-ST-ZIP WILLISTON FL 32696

TITLE SEC. ☐ Change ☒ Addition
NAME MATVEJS, MIAN J.
STREET ADDRESS 17851 NE ST RD 121
CITY-ST-ZIP WILLISTON FL 32696

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-05

Date

352-317-1083

Daytime Phone #