

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

08-01-2005 90023 046 ***150.00

FILED

05 AUG 24 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1st MOORE CR2E034 (10/04)

DOCUMENT # P96000024984 1. Entity Name COMMERCIAL CORP.									
Principal Place of Business 3884 TAMPA RD. OLDSMAR FL 34677 US		Mailing Address 3884 TAMPA RD. OLDSMAR FL 34677 US							
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.							
City & State Zip Country		City & State Zip Country		4. FEI Number 59-3377966 <table border="1" style="float: right; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Applied For</td> <td style="padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Not Applicable</td> <td style="padding: 2px;"><input type="checkbox"/></td> </tr> </table>		Applied For	<input type="checkbox"/>	Not Applicable	<input type="checkbox"/>
Applied For	<input type="checkbox"/>								
Not Applicable	<input type="checkbox"/>								
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent PFRENGLE, KENNETH 6884 TAMPA RD. OLDSMAR FL 34677					
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE</small>					
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. <input type="checkbox"/> \$5.00 May Be Added to Fees							
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PFRENGLE, KENNETH 3884 TAMPA RD. OLDSMAR FL 34677			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
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:				Date: 7/20/05 Daytime Phone #: 8138550216					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE AND DAYTIME PHONE NUMBER					

7 22 2005

State of Florida
Corporate Annual Reporting

TO WHOM IT MAY CONCERN:

Attached are annual reports for the following corporations

Corp Name	FEI #	Document #
General Purpose	59 3367102	P95 000096756
✓ General Industrial	59 3377966	P95000024975
✓ Florida Blower	59 2753267	J 34989
✓ Eagle Mini	59 3273944	p94000072222
✓ Commercial	59 3377966	p96000024984
✓ Legal Ease	59 3384566	p96000031573
✓ Anastasia	59 3514230	p980000051706

All of these reports were received after July 1, 2005, thus making them all delinquent before there was an opportunity to take advantage of the normal renewal rate. Realizing that the delinquency is not a result of Corporate neglect, but State neglect, checks are attached for \$150.00 normal rate.

A check is also attached for Oxford Property Management Inc, FEI 59 3422438, for which no return was sent

Respectfully,

Kenn Pfrengle
3884 Tampa Rd
Oldsmar, FL 34677

813 855 0210

8-23-05

To: Michelle Idunna

@
by Fax

850-245 6047

Please Confirm
Thank you

1.01

2002