## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## **Secretary of State** DOCUMENT # P96000096618 02-16-2005 90053 006 \*\*\*150.00 1. Entity Name DAVID & SAUL, INC. Principal Place of Business Mailing Address 9541 HARDING AVE 9541 HARDING AVE SURFSIDE, FL 33154 SURFSIDE, FL 33154 50016745 CR2E034 (10/03) 01182005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0709123 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WINTRUB, SAUL C DO NOT WRITE 9541 HARDING AVE SURFSIDE, FL 33154 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) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. DP TITLE SHAKURY, AHARON NAME STREET ADDRESS 9541 HARDING AVE SURFSIDE, FL 33154 CITY-ST-ZIP TITLE WINTRUB, SAULC NAME 9541 HABDING AVE STREET ADDRESS SURFSIDE, PL 33154 CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZiP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filling 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.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Feb 16, 2005 8:00 am

Daytime Phone 4