

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2005 8:00 am
Secretary of State

02-18-2005 90059 019 ***150.00

DOCUMENT # P97000039396

1. Entity Name

ANY AXLE INCORPORATED



Principal Place of Business

**5598 NW 10TH TERRACE
FORT LAUDERDALE FL 33309**

Mailing Address

**5598 NW 10TH TERRACE
FORT LAUDERDALE FL 33309**

20012782



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0759252

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CHONG, AMOS P
5598 NW 10TH TERRACE
FORT LAUDERDALE FL 33309**

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 **D** ☐ Delete
NAME **CHONG, AMOS P**
STREET ADDRESS **5598 NW 10TH TERRACE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33309**

TITLE **D** ☒ Delete
NAME **BRAWLEY, JACK W**
STREET ADDRESS **320 SE 11TH STREET**
CITY-ST-ZIP **POMPANO BEACH FL 33060**

TITLE **S** ☐ Delete
NAME **LYN, ROBERT D**
STREET ADDRESS **7103 NW 97 AVE**
CITY-ST-ZIP **TAMARAC FL 33321**

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 ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Amos P. Chong
Amos P. Chong

2/15/05

954-938-3545

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

December 31, 2004

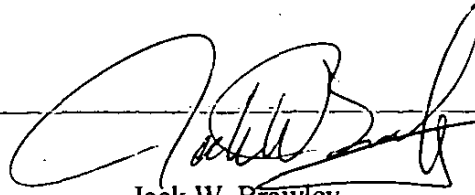
Any Axle, Inc.

ATTACHMENT

20012782

#P97000639396

Effective December 31, 2004, I am resigning as an Officer/ Director of Any Axle, Inc.

A handwritten signature in black ink, appearing to read 'Jack W. Brawley', is written over a horizontal line.

Jack W. Brawley