

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Aug 24, 2005 8:00 am
Secretary of State

07-27-2005 90047 042 ***150.00

DOCUMENT # P97000046487 1. Entity Name IRBY EQUIPMENT, INC.			
Principal Place of Business 10750 SW FOX BROWN ROAD INDIANTOWN FL 34956		Mailing Address 10750 SW FOX BROWN ROAD INDIANTOWN FL 34956	
2. Principal Place of Business 10750 SW Foxbrown Rd		3. Mailing Address 10750 SW Foxbrown Rd	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Indiantown, FL		City & State Indiantown FL	
Zip 34956	Country Martin	Zip 34956	Country Martin
4. FEI Number 65-0769339		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent IRBY, DAVID 10750 SW FOX BROWN ROAD INDIANTOWN FL 34956		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 <u>David W. Irby</u> <small>Signature, typed or printed name of registered agent and title if applicable</small>		DATE <u>8/17/05</u> <small>(NOTE: Registered Agents signature required when re-registering)</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 PD	NAME IRBY, DAVID	<input type="checkbox"/> Delete	
STREET ADDRESS 10750 SW FOXBROWN RD	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY- ST- ZIP INDIANTOWN FL 34996			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY- ST- ZIP 			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY- ST- ZIP 			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY- ST- ZIP 			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 David W. Irby DATE 8/17/05

ATTACHMENT

00026345

IRBY EQUIPMENT INC.
10750 SW FOXBROWN RD.
INDIANTOWN, FL. 34956

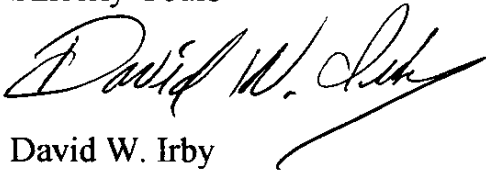
August 17, 2005

FLORIDA DEPTMENT OF STATE

Reference Number: P97000046487

Please be advised that we did not recieve our annual report notice. I am the sole officer of my business.

Sincerly Yours


David W. Irby