


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000049752 1. Entity Name FIRE HOSE, INC.	
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Principal Place of Business 7680 SW 53 PLACE MIAMI, FL 33143-2807	Mailing Address 7680 SW 53 PLACE MIAMI, FL 33143-2807
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DO NOT WRITE IN THIS SPACE



03162005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0761406	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DREYFUSS, JACQUES
7680 SW 53 PLACE
MIAMI, FL 33143-2807

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DREYFUSS, JACQUES 7680 SW 53 PLACE MIAMI, FL 331432807
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP DREYFUSS, FRANCOISE 7680 S.W. 53 PLACE MIAMI, FL 331432807
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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03/19/05-80036-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 fees empowered.

SIGNATURE: X Jacques Dreyfuss Jacques Dreyfuss X 3/15/05 305-669-3200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #