

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

DOCUMENT # P97000062102

1. Entity Name

TYLER TROPICAL FISH, INC.



**FILED
Apr 12, 2005 8:00 am
Secretary of State**

04-12-2005 90150 013 ***150.00

Principal Place of Business
34600 WASHINGTON LOOP ROAD
PUNTA GORDA FL 33982

Mailing Address
34600 WASHINGTON LOOP ROAD
PUNTA GORDA FL 33982

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0768763

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GULAU, RONALD
34740 WASHINGTON LOOP ROAD
PUNTA GORDA FL 33982

New address

Name

Ronald Gulau

Street Address (P.O. Box Number is Not Acceptable)

34600 Washington Loop Rd

City

Punta Gorda

FL

Zip Code
33982

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

Ronald Gulau - Pre.

4-6-05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE Registered Agent signature required when translating)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
RONALD A GULAU
5241 BLACKJACK CIRCLE
PUNTA GORDA FL 33982

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P U P T S.
Ronald A. Gulau
5241 BlackJack Circle
Punta Gorda, FL 33982

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VPST
H ROBERT COLEMAN
34740 WASHINGTON LOOP RD
PUNTA GORDA FL 33982

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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Change Addition

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CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change 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: *Ronald Gulau - Ronald Gulau - Pre.*

4-6-05 941-575-1213

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #