

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90072 030 ***150.00

DOCUMENT # P97000077950

1. Entity Name

C. AND S., INC.



Principal Place of Business

3962 CLASSIC COURT
WEST PALM BEACH FL 33417

Mailing Address

3962 CLASSIC COURT
WEST PALM BEACH FL 33417

2. Principal Place of Business

6712 Traveler road
Suite, Apt. #, etc.

3. Mailing Address

6712 Traveler rd
Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

West Palm Beach

City & State

West Palm Beach

4. FEI Number

65-0779875

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BENOIT, CHARLES
3962 CLASSIC COURT
WEST PALM BEACH FL 33417

7. Name and Address of New Registered Agent

Name: BENOIT, CHARLES
Street Address (P.O. Box Number is Not Acceptable)

6712 Traveler road
City: West Palm Beach

FL Zip Code: 33411

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, 2004 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: PD ☐ Delete
NAME: BENOIT, CHARLES
STREET ADDRESS: 3962 CLASSIC COURT
CITY-ST-ZIP: WEST PALM BEACH FL 33417

TITLE: VD ☒ Delete
NAME: BENOIT, SHAY
STREET ADDRESS: 3962 CLASSIC COURT
CITY-ST-ZIP: WEST PALM BEACH FL 33417

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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: VD ☐ Change ☒ Addition
NAME: BENOIT, Phyllis
STREET ADDRESS: 204 Somerset K
CITY-ST-ZIP: West Palm Beach, FL 33417

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/04 561-818-0678

Date

Daytime Phone #