

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000088387

FILED
Apr 29, 2005
Secretary of State

Entity Name: CURBMASTER OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

5500 EAGLE DR
FORT PIERCE, FL 34951 US

New Principal Place of Business:

Current Mailing Address:

5500 EAGLE DR
FORT PIERCE, FL 34951 US

New Mailing Address:

FEI Number: 65-0787061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'SHEA, SHERI-LYN K
5500 EAGLE DRIVE
FORT PIERCE, FL 34951 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HYDE, HENRY J
Address: 80 CEDAR CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: STD () Delete
Name: O'SHEA, SHERI-LYN K
Address: 5500 EAGLE DR
City-St-Zip: FORT PIERCE, FL 34951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERI-LYN K. O'SHEA

STD

04/29/2005

Electronic Signature of Signing Officer or Director

Date