


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 01, 2004 8:00 am
Secretary of State

04-01-2004 90004 046 ***158.75

DOCUMENT # P97000107194	
1. Entity Name YARDARM DEVELOPMENT, INC.	

Principal Place of Business 218 APOLLO BCH APOLLO BEACH FL 33572	Mailing Address 218 APOLLO BCH APOLLO BEACH FL 33572
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2. Principal Place of Business 2400 Airport Rd.	3. Mailing Address 2400 Airport Rd
Suite, Apt. #, etc. Suite B	Suite, Apt. #, etc. Suite B
City & State Plant City, FL	City & State Plant City, FL
Zip 33563	Country USA



MOORE CR2E034 (11/03)

6. Name and Address of Current Registered Agent PETERSON, MICHAEL L ESQ 218 APOLLO BEACH BOULEVARD APOLLO BEACH FL 33572	
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7. Name and Address of New Registered Agent	
Name Arturo S. Guevara	
Street Address (P.O. Box Number is Not Acceptable) 2400 Airport Rd	
Suite B	
City Plant City	FL
Zip Code 33563	

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 Arturo S. Guevara	DATE 3-23-04

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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS CHAMBERS, DEBORAH P 4108 W WISCONSIN AVE TAMPA FL 33616 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD PETERSON, MICHAEL L 662 YARDARM APOLLO BEACH FL 33572 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Arturo S Guevara 2400 Airport Rd Suite B Plant City, FL 33563 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Jose Guevara 2400 Airport Rd Suite B Plant City, FL 33563 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Treasurer Silvia Padron 2400 Airport Rd suite B Plant City, FL 33563 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: Arturo S. Guevara	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Arturo S Guevara	Date 3-23-04	Daytime Phone # (813) 757-2444
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