

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 08, 2007 8:00 am**  
**Secretary of State**

01-08-2007 90245 014 \*\*\*150.00

**DOCUMENT # P98000010031**

1. Entity Name  
**BEND-MASTER, INC.**



Principal Place of Business  
**3000-15 NW 25TH AVE  
POMPAÑO BEACH, FL 33069**

Mailing Address  
**3000-15 NW 25TH AVE  
POMPAÑO BEACH, FL 33069**

600000000



01042007 Chg-P CR2E034 (12/06)

4. FEI Number  
**65-0809316**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**APPLEGATE, EDWARD  
1461 SW 12 AVE # D  
POMPAÑO BEACH, FL 33069**

**7. Name and Address of New Registered Agent**

Name  
**APPLEGATE, EDWARD**

Street Address (P.O. Box Number is Not Acceptable)  
**3000-15 NW 25TH AVE**

City  
**CORAL SPRINGS**

FL Zip Code  
**33069**

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

**EDWARD APPLGATE**

**1/4/07**

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

(NOTE: Registered Agent signature required when renewing)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE **PST D** ☐ Delete  
NAME **APPLEGATE, EDWARD**  
STREET ADDRESS **1461 SW 12 AVE # D**  
CITY-ST-ZIP **POMPAÑO BEACH, FL 33069**

TITLE **VP, S.D.** ☐ Delete  
NAME **RON ASKIN**  
STREET ADDRESS **3166 NW 114 AVE**  
CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

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 **P, T, D** ☒ Change ☐ Addition  
NAME **EDWARD APPLGATE**  
STREET ADDRESS **3000-15 NW 25TH AVE**  
CITY-ST-ZIP **POMPAÑO BEACH, FL 33069**

TITLE **VP S.D.** ☐ Change ☒ Addition  
NAME **RON ASKIN**  
STREET ADDRESS **3166 NW 114 AVE**  
CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

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 exemptions contained in Chapter 119, 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 life empowered.

SIGNATURE:

**RON ASKIN**

**1/4/07**

**954-941-9940**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #