2005 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 11, 2005 08:00 AM DOCUMENT # P98000027717 **Secretary of State** 1. Entity Name TOTH BROTHERS CARPENTRY, INC. Principal Place of Business Mailing Address 8890 22ND STREET 8890 22ND STREET VERO BEACH, FL 32966 VERO BEACH, FL 32966 03022005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0824789 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent TOTH, LANE DO NOT WRITE 8890 22ND STREET VERO BEACH, FL 32966 IN THIS SPACE 3. 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 bite if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE TOTH, LANE NAME STREET ADDRESS 8890 22ND STREET CITY-ST-ZIP VERO BEACH, FL 32966 VTD TITLE NAME TOTH, LANCE 8890 22ND ST U0000002594**5**9 STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32966 03/11/05-80025-009 150.00 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joine Jato

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

LANE TOTH PSO

3-1-05

(772)978-4337

FILED

Daylime Phone