

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2005 8:00 am**  
**Secretary of State**

04-28-2005 90215 019 \*\*\*150.00

<b>DOCUMENT # P98000036830</b> 1. Entity Name SOUTH FLORIDA CARPENTRY, INC.					
Principal Place of Business 92 PHEASANT RUN BLVD. WEST PALM BEACH, FL 33415			Mailing Address 92 PHEASANT RUN BLVD. WEST PALM BEACH, FL 33415		
2. Principal Place of Business <i>13680 Paddock Drive</i> Suite, Apt. #, etc.		3. Mailing Address <i>13680 Paddock Drive</i> Suite, Apt. #, etc.			
City & State <i>Wellington, Florida</i> Zip <i>33414</i> Country <i>USA</i>		City & State <i>Wellington, Florida</i> Zip <i>33414</i> Country <i>USA</i>		01272005 Chg-P CR2E034 (10/03)	
4. FEI Number 65-0837077				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent RIFF, EDWARD L 92 PHEASANT RUN BLVD. WEST PALM BEACH, FL 33415	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <i>13680 Paddock Drive</i> City <i>Wellington</i> <b>FL</b> Zip <i>33414</i>				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVS RIFF, EDWARD L 92 PHEASANT RUN BLVD. WEST PALM BEACH, FL 33415		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME SAME 13680 Paddock Drive Wellington, FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RIFF, LYNN 92 PHEASANT RUN BLVD. WEST PALM BEACH, FL 33415		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME SAME 13680 Paddock Drive Wellington, FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		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"/> Delete		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"/> Delete		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"/> Delete		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: <i>[Signature]</i> <span style="float: right;">4/30/05</span> _____ Date _____ Daytime Phone # _____					