

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90269 028 ***150.00

DOCUMENT # P99000009415

1. Entity Name
APPLIANCE PLUS CONSUMER SERVICES, INC.



Principal Place of Business
1507 CRYSTAL LAKE DRIVE
LAKELAND, FL 33801

Mailing Address
1507 CRYSTAL LAKE DRIVE
LAKELAND, FL 33801

20041223



2. Principal Place of Business
5459 BENTGRASS DR

3. Mailing Address
5459 BENTGRASS DR

Suite, Apt. #, etc.
APT 111

Suite, Apt. #, etc.
APT 111

03262005 Chg-P CR2E034 (10/03)

City & State
SARASOTA, FL

City & State
SARASOTA, FL

4. FEI Number
59-3553846

Applied For
Not Applicable

Zip
34243

Country

Zip
34243

Country

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

6. Name and Address of Current Registered Agent

TORO, JAVIER
1507 CRYSTAL LAKE DRIVE
LAKELAND, FL 33801

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

5459 BENTGRASS DR APT 111

City

SARASOTA

FL

Zip Code

34243

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

Javier Toro

PRESIDENT

X 4-15-05

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTSD
TORO, JAVIER
1507 CRYSTAL LAKE DRIVE
LAKELAND, FL 33801 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
TORO, NATALIE
1507 CRYSTAL LAKE DR.
LAKELAND, FL 33801 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
5459 BENTGRASS DR, APT 111
SARASOTA, FL 34243

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
5459 BENTGRASS DR, APT 111
SARASOTA, FL 34243

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:

Javier Toro

JAVIER TORO

PRESIDENT

X 4-15-05

941/374-0909

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone #