

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90073 002 ***150.00

DOCUMENT # P99000015569	
1. Entity Name GOODKIND & CO., INC.	

Principal Place of Business 103 HAWKSBILL WAY JUPITER, FL 33458	Mailing Address 103 HAWKSBILL WAY JUPITER, FL 33458
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DO NOT WRITE IN THIS SPACE

01132005 No Chg-P CR2E034 (10/03)

4. FEI Number 13 1913341	Applied For ☐
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**GOODKIND, IRENE
103 HAWKSBILL WAY
JUPITER, FL 33458**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when substituting)

DATE

**FILE NOW! FEE IS \$150.00
After May 1, 2005 Fee will be \$250.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fee**

TITLE	P
NAME	GOODKIND, IRENE
STREET ADDRESS	103 HAWKSBILL WAY
CITY - ST - ZIP	JUPITER, FL 33458
TITLE	D
NAME	PORT, IRVING
STREET ADDRESS	1621 EAST 40TH ST STE 100B
CITY - ST - ZIP	NEW YORK, NY 10016
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

10. I hereby verify that the information supplied with this filing does not qualify for the exemption stated in Section 11.001(2)(b), Florida Statutes. I declare under oath 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 filers empowered.

SIGNATURE:*Irene Goodkind**April 26, 2005**561-744-2661*

SIGNATURE AND TITLE OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

Date

Daytime Phone

*Change of address as of May 20, 2005—
148 Via Castilla
Jupiter, FL 33458*