2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2004 8:00 am
Secretary of State
02-06-2004 90002 036 ***150.00

DOCUMENT # P99000104187

1. Entity Name
CUBERT DOZER SERVICE, INC.

Principal Place of Business	Mailing Address
4577 MILES DR PORT ORANGE, FL 32127	4577 MILES DR PORT ORANGE, FL 32127

01132004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
3869 S. Nova Rd	3869 S. nova Rd
Suite, Apt. #, etc.: Suite #2	Suite, Apt. #, etc.: Suite #2
City & State: Port Orange FL	City & State: Port Orange FL
Zip: 32127 Country: U.S.A.	Zip: 32127 Country: U.S.A.

4. FEI Number: 59-3614297 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CUBERT, RICHARD L
4577 MILES DR
PORT ORANGE, FL 32127

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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: Richard L. Cubert 1.17.04
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, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	P CUBERT, RICHARD L 4577 MILES DR DAYTONA BEACH, FL 32127	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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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: X Richard L. Cubert 1-17-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #