2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE

Feb 08, 2005 08:00 AM Secretary of State **DOCUMENT # \$17708** 1. Entity Name SIEGEL AND SONS, INC. Principal Place of Business Mailing Address 78623 NW 77TH AVE 7862 NW 77TH AVE TAMARAC FL 33321-2983 US TAMARAC FL 33321-2983 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 65-0221829 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SIEGEL, STAN Street Address (P.O. Box Number is Not Acceptable) 7862 NW 77TH AVE TAMARAC FL 33321 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 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 \$5.00 May Be Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. Addition TITLE PTD Delete TOBE SIEGEL, STAN NAME NAME 7862 NW 77TH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMARAC FL CITY-SI-ZIP SD Change ☐ Addition TITLE ☐ Delete U00000219157 DRAPER, JEFFREY NAME 02/08/05-80016-015 150.00 STREET ADDRESS 12642 NW 29TH ST STREET ADDRESS CITY-ST-ZIP art-si CORAL SP FL 33065 ☐ Delete Change ☐ Addition HILE MILE NAME NAME SIEGEL, MARC STREET ADDRESS STREET ADDRESS 9808 NW 54TH PL CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL Change ☐ Addition THILE ☐ Delete STREET ADDRESS STREET ADDRESS City-SI-7IP CHY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete HILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CLTY-ST-ZIP Change Addition HILE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 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 eath, 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

FILED