


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 26, 2005 8:00 am
Secretary of State

08-09-2005 90002 011 ***150.00

DOCUMENT # S44053

1. Entity Name
INSTITUTE FOR EMERGENCY RESOURCES DEVELOPMENT, INC.



Principal Place of Business 6621 FALCONSGATE AVENUE DAVIE, FL 33331	Mailing Address 6621 FALCONSGATE AVENUE DAVIE, FL 33331
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DO NOT WRITE IN THIS SPACE



08042005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0328194	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MUNIZ, W. J.
 6621 FALCONSGATE AVENUE
 DAVIE, FL 33331

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

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	D MUNIZ, W. J. 6621 FALCONSGATE AVE. DAVIE, FL
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DO NOT WRITE IN THIS SPACE

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: W. J. Muniz W. J. MUNIZ 8-5-05 954-434-7443
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

06026479

COPY OF ORIGINAL LETTER SENT WITH ANNUAL REPORT

August 5, 2005

Division of Corporations
P.O. Box 618
Tallahassee, FL 32314-6198

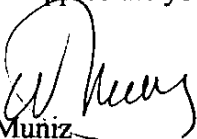
Subject: Waiver of penalty fee - Document # S44053

I am respectfully requesting to have the penalty fee waived for the attached 2005 for profit corporation annual report.

As indicated in my conversation with your office; I was only made aware of my need to submit our annual report when I received your postcard of "notice of intent to dissolve". I had not received any prior notice of fee payment due.

As discussed with staff from your office, I am enclosing the filing fee of \$150.00 and as recommended, am requesting that the penalty please be waived.

I would appreciate your consideration of this request.


W.J. Muniz
6621 Falconsgate Ave
Davie, FL33331

For: Document #S44053
Institute for Emergency Resources Development, Inc.



ATTACHMENT

U6026479

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 10, 2005

INSTITUTE FOR EMERGENCY RESOURCES DEVELOPMENT, INC.
6621 FALCONSGATE AVENUE
DAVIE, FL 33331

Subject: ~~INSTITUTE FOR EMERGENCY RESOURCES DEVELOPMENT, INC.~~

Reference Number: S44053

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS
ANNUAL REPORTS SECTION

8/19/05
PLEASE NOTE
ATTACHED COPY OF REQUEST
FOR WAIVER OF PENALTY FEE.
I WAS ADVISED THE ORIGINAL
REQUEST HAD NOT BEEN
RECEIVED