## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Apr 22, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # S50377 D SPRINKLERS AND IRRIGAT		Secretary of State				
Principal Place 4911 SW 10- COOPER CITY	4TH AVE	lailing Address 1911 SW 104TH A <u>VE</u> COOPER CITY, FL 33328			NI KINI YATUB IZIN 1990 1991 61	##: #{# 3 <b>#</b>  # 1 # wi1 wr	elf sildiffuur II (TVI
D	OO NOT WRITE I	V THIS SPACE	ČE	01192005 4. FEI Numb 65-026		CR2E034 (10/	Applied For Not Applicable Additional
	6. Name and Address of Current Regis	Mary and the selection of	<b>5.</b> Continuate	,	Fee Re	quired	
ANTON & 1940 HARI	ARED G STANISH RISON STREET, SUITE 300 DOD, FL 33020		pri manggippin ming il n n 1 n n ngang		NOT WE		
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 femiliar with, and accept the obligations of registered agent.  SIGNATURE							
JIGINATORE.	Signature, typed or printed name of registered agent and title	d Agent signature required	when reinstating)		DATE		
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.		00 May Be ed to Fees	1,0000003 04/22/05-8	323910 3006 <b>7-</b> 017	150.00
10.	OFFICERS AND DIRE	CTORS					*,
NAME STREET ADDRESS CITY-ST-ZIP	PTD CANTOR, LEE R 4911 S W 104TH AVE COOPER CITY, FL					·	ent years o
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD - CANTOR, DARLENE - 4911 S W 104TH AVE COOPER CITY, FL -				- 1	,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WE	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPA	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			· ·				
12. I hereby indicated of the corchanged	I certify that the Information supplied with this i I on this report or supplemental report is true rporation or the receiver or trustee empowere , or on an attachment with an address, with a	illing does not qualify for the exer and accurate and that my signat d to execute this report as requir the other like empowered.	mption stated in Se ture shall have the s red by Chapter 607	ction 119.07(3) same legal effe , Florida Statute	(i), Florida Statutes. I fuct as if made under oat es; and that my name a	irther certify that th; that I am an of appears in Block	he information ficer or director 10 or Block 11 if