

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # S61002

1. Entity Name
SOUTHERN CAULKING & WATERPROOFING, INC.



Principal Place of Business

7546 W. MCNAB RD.

#B25

N LAUDERDALE, FL 33068 US

Mailing Address

7546 W. MCNAB RD.

#B25

N LAUDERDALE, FL 33068 US

FILED
Apr 02, 2005 08:00 AM
Secretary of State



03282005 No Chg-P CR2E034 (10/03)

4. FEI Number

65-0277391

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ELIAS, DAVID
10941 NW 7 STREET
CORAL SPRINGS, FL 33071

**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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000284621
04/02/05-80013-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ELIAS, DAVID
STREET ADDRESS	10941 NW 7TH ST.
CITY-ST-ZIP	CORAL SPRINGS, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID A. ELIAS

Date

3/28/05

Daytime Phone #

954-341-9717