

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K36236

Entity Name: PABRICO INC.

FILED
Jan 23, 2005
Secretary of State

Current Principal Place of Business:

18704 GLADES CUT-OFF RD
FORT PIERCE, FL 34987 US

New Principal Place of Business:

Current Mailing Address:

18704 GLADES CUT-OFF RD
FORT PIERCE, FL 34987 US

New Mailing Address:

FEI Number: 65-0073463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WORLDWIDE CORPORATE SERVICES, INC.
2780 E. OAKLAND PARK BLVD
FT. LAUDERDALE, FL 33306 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPS () Delete
Name: KENT, BRIAN
Address: 18704 GLADES CUT-OFF RD
City-St-Zip: FORT PIERCE, FL 34987 US

Title: DP () Delete
Name: SMITH, ROBERT L
Address: 105 CARRIAGE HOUSE WAY
City-St-Zip: WYLIE, TX

Title: AS (X) Delete
Name: GOLDENBERG, STEPHEN F
Address: 1 FINANCIAL PLAZA, #2626
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KENT, BRIAN
Address: 18704 GLADES CUT-OFF RD
City-St-Zip: PORT ST LUCIE, FL 34987 US

Title: VP (X) Change () Addition
Name: KENT, PATRICIA M
Address: 18704 GLADES CUT OFF RD
City-St-Zip: PORT ST LUCIE, FL 3987

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN KENT

_____ Electronic Signature of Signing Officer or Director

P

01/23/2005

_____ Date