

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 471461

Entity Name: S.B.M. ENTERPRISES, INC.

FILED
Apr 16, 2005
Secretary of State

Current Principal Place of Business:

4595 NW 37 CT
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

4595 NW 37 CT
MIAMI, FL 33142 US

New Mailing Address:

FEI Number: 59-1866366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, JOSE A
150 ALHAMBRA CIRCLE
1270
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

RODRIGUEZ, JOSE A
100 SW 2ND STREET
2900
MIAMI, FL 33131 US

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:

04/16/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: CICERO, ROBERT I.,
Address: 4595 NW 37 CT
City-St-Zip: MIAMI, FL 33142

Title: D (X) Delete
Name: CICERO, IRIS,
Address: 4595 NW 37 CT
City-St-Zip: MIAMI, FL 33142

Title: PD () Delete
Name: CICERO, MATHEW J.,
Address: 4595 NW 37 CT
City-St-Zip: MIAMI, FL 33142

Title: ST () Delete
Name: BENNETT, PAUL
Address: 4595 NW 37 CT
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: PAUL H. BENNETT

ST

04/16/2005

Electronic Signature of Signing Officer or Director

Date