## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 685029**

FILED Apr 25, 2005 Secretary of State

Entity Name: FOX ELECTRIC ENTERPRISES, INC.

urrent P	rincipal Place	of Business:	New Principa	
	1ST STREET FL 33016 U	JS		
Current Mailing Address:		New Mailing Address:		
	1ST STREET FL 33016 U	JS		
El Number	: 59-2024597	FEI Number Applied For ( )	FEI Number Not Applicat	ole ( ) Certificate of Status Desired ( )
lame and	d Address of C	urrent Registered Agent:	Name and Ad	Idress of New Registered Agent:
691 W. 8	DAVID S 1ST STREET FL 33016 U	JS		
	e named entity s e of Florida.	submits this statement for the	purpose of changing its re	egistered office or registered agent, or both
IGNATU	RE:			
				<u> </u>
		ic Signature of Registered A	gent	Date
		g Trust Fund Contribution ( ).		Date CHANGES TO OFFICERS AND DIRECTO
FFICER tte: ame: ddress:	mpaign Financing	Trust Fund Contribution ( ).  TORS:  Delete HEN R  TREET		
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tle: ame: ddress: ty-St-Zip: tle: ame: ddress: ty-St-Zip: tte: ame: ddress: ty-St-Zip:	S AND DIRECTOR (X) FOSTER, STEP 2691 W 81ST S HIALEAH, FL 3 PSTD () FOSTER, DAVII 2691 W. 81ST S HIALEAH, FL 3	Trust Fund Contribution ( ).  TORS:  Delete HEN R STREET 3016  Delete DS STREET 3016  Delete C STREET	ADDITIONS/O Title: Name: Address: City-St-Zip: Title: Name: Address:	CHANGES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition
	S AND DIRECT  CD (X) FOSTER, STEP 2691 W 81ST S HIALEAH, FL 3 PSTD () FOSTER, DAVII 2691 W. 81ST S HIALEAH, FL 3  V () ALLEN, KAREN 2691 W. 81ST S	Trust Fund Contribution ( ).  TORS:  Delete HEN R STREET 3016  Delete C STREET 3016  Delete C C STREET 3016  Delete C C STREET 3016  Delete C STREET 3016	ADDITIONS/O Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	CHANGES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition  ( ) Change ( ) Addition

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: DAVID S FOSTER PSTD 04/25/2005