

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000083015

FILED
Apr 25, 2005
Secretary of State

Entity Name: PARISAN ENTERPRISE, INC.

Current Principal Place of Business:

2895 W. SUNRISE BLVD.
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

2895 W. SUNRISE BLVD.
FT. LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-0813714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIRCH, ANGELA
3851 NW 6TH ST
FT. LAUDERDALE, FL 33311 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: DP () Delete
Name: BIRCH, ANGELA
Address: 519 NW 23 AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: DS () Delete
Name: BIRCH-COLLINS, LISA
Address: 519 NW 23 AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: DV () Delete
Name: BIRCH, DAVID L
Address: 319 NW 23 AVE.
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: DT () Delete
Name: BIRCH, ERIC
Address: 519 NW 23 AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

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: ANGELA BIRCH

DP

04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date