## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000036431

FILED Apr 27, 2005 Secretary of State

| Entity Nan  | ne: RON WIL  | LIAMS ENTERPRISES, INC.                                      |   |                                      |
|---|--|--|---|--------------------------------------|
| Current Pr  | incipal Place  | of Business:   | New Principal Place of                                  | Business:                            |
| 6340 17TH<br>ST PETER:  | ST S<br>SBURG, FL 3                                      | 3712   |   |                                      |
| Current Ma  | ailing Addres  | s:   | New Mailing Address:                                    |                                      |
| 6340 17TH<br>ST PETER:  | ST S<br>SBURG, FL 3                                      | 3712   |   |                                      |
| FEI Number:   | 80-0083846   | FEI Number Applied For ( )                                   | FEI Number Not Applicable ( )                           | Certificate of Status Desired ( )    |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |  |  |   |                                      |
| SPIEGEL &<br>1840 SW 2<br>4TH FLOOI<br>MIAMI, FL  | R  | Α.   | RON WILLIAMS<br>6340 17TH ST SOUTH<br>ST PETERSBURG, FL | 33712 US                             |
| The above in the State  |  | submits this statement for the p                             | urpose of changing its registered                       | office or registered agent, or both, |
| SIGNATUR  | E: RON WIL   | LIAMS  |   | 04/27/2005                           |
| Election Cam  |  | ic Signature of Registered Age  Trust Fund Contribution ( ). | ent   | Date                                 |
| OFFICERS AND DIRECTORS:   |  |  | ADDITIONS/CHANGES                                       | TO OFFICERS AND DIRECTORS:           |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | PD ()<br>WILLIAMS, ROI<br>6340 17TH ST S<br>ST PETERSBUI | 5  | Title: ( Name: Address: City-St-Zip:                    | ) Change ( ) Addition                |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | STD ()<br>WILLIAMS, MAI<br>6340 17TH ST ST PETERSBUI     | 5  | Title: (<br>Name:<br>Address:<br>City-St-Zip:           | ) 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: RON WILLIAMS **PRES** 04/27/2005