


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 30, 2005 08:00 AM
Secretary of State

DOCUMENT # 389453 1. Entity Name TAMPA ENTERPRISES, INC.	
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Principal Place of Business 1320 S. DIXIE HWY., STE 940 CORAL GABLE, FL 33146	Mailing Address 1320 S. DIXIE HWY., STE 940 CORAL GABLE, FL 33146
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DO NOT WRITE IN THIS SPACE



03232005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1412496	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HERSKOWITZ, BERNARD 1320 S. DIXIE HWY., STE 940 CORAL GABLE, FL 33146	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when resigning)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERSKOWITZ, JEROME 430 CAMPANA AVENUE CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HERSKOWITZ, BERNARD 7501 S.W. 114 STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HERSKOWITZ, ALLAN (ASST) 8820 S.W. 105TH STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDV HERSKOWITZ, JACK 9100 S. DADELAND #1404 MIAMI, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>Bernard Herskowitz</u>	Date: <u>3/28/05</u>	Daytime Phone #
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