

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90258 012 ***150.00

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1. Entity Name
MITCH ENTERPRISES, INC.



Principal Place of Business
6765 AUSTRALIAN STREET
JUPITER, FL 33458

Mailing Address
6765 AUSTRALIAN STREET
JUPITER, FL 33458-3845

20045727



01202005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1575005

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MITCHELL, JEANETTE
6765 AUSTRALIAN STREET
JUPITER, FL 33458

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IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MITCHELL, NOBLE
STREET ADDRESS 6765 AUSTRALIAN STREET
CITY-ST-ZIP JUPITER, FL

TITLE VPSD
NAME MITCHELL, JEANNETTE
STREET ADDRESS 6765 AUSTRALIAN STREET
CITY-ST-ZIP JUPITER, FL

TITLE DT
NAME MITCHELL, DARRELL
STREET ADDRESS 6765 AUSTRALIAN STREET
CITY-ST-ZIP JUPITER, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: *Jeannette Mitchell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 22, 2005 (561-746-0338)
Date Daytime Phone #