2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATIVE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: Ł

FILED Jan 24, 2005 08:00 AM Secretary of State

ANNUAL REPORT			Jan 24, 2005 06.00 A	
DOCUMENT # 585052 1. Entity Name HIGHWAY 31 ENTERPRISES, INC.				Secretary of State
Principal Place of Business 18871 STATE ROAD 31 FT.MYERS, FL 33917	Mailing Address 18871 STATE ROAD 31 FT.MYERS, FL 33917		# (#0)(0) #()(EL KENNEL ELIKA BURUK KUMUR KANA KARAN BURUK KUMUN KURUK BURUK BIRUK BIRUK BU
DO NOT WRITE IN THIS SPACE		CE	01102005 No Chg-P CR2E034 (10/03) 4. FEI Number	
6. Name and Address of Current Reg CARY, GLEN 18451 N.OLGA DR. ALVA, FL 33920	stered Agent			NOT WRITE THIS SPACE
S. 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.			00 May Be ed to Fees	
10. OFFICERS AND DIRE TITLE PD NAME ARMEDA, NICK STREET ADDRESS 19440 ARMEDA RD. CITY-ST-ZIP ALVA, FL TITLE VD NAME CARY, GLENN STREET ADDRESS 18451 N.OLGA DR.	CTÒRS			U00000192316 U1/25/05-60013-000 150.00
CITY-ST-ZIP ALVA, FL 33920, TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE	<u> </u>			NOT WRITE THIS SPACE
NAMAE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		-		
TITLE NAME STREET ADDRESS GITY-ST-ZIP 12. I hereby certify that the information supplied with this indicated on this report or supplemental report is true.	and accurate and that my signati	Ire shall have the s	ame legal ettec	i), Florida Statutes. I further certify that the t as if made under oath; that I am an officer of s; and that my name appears in Block 10 or Block 11 if