


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 08:00 AM
Secretary of State

DOCUMENT # 660663
 1. Entity Name
BRAVADOS ENTERPRISES, INC.



Principal Place of Business Mailing Address
 104 HILL CREST DR 104 HILL CREST DR
 LONGWOOD, FL 32779 US LONGWOOD, FL 32779 US

DO NOT WRITE IN THIS SPACE



01242005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 59-1978414 Not Applicable

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

6. Name and Address of Current Registered Agent
 VALDES, J. RAYMOND
 104 HILL CREST DRIVE
 LONGWOOD, FL 32779

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

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: VALDES, J. RAYMOND
 STREET ADDRESS: 104 HILL CREST DR.
 CITY-ST-ZIP: LONGWOOD, FL 32779

TITLE: SD
 NAME: VALDES, DENISA
 STREET ADDRESS: 104 HILL CREST DR.
 CITY-ST-ZIP: LONGWOOD, FL 32779

TITLE: _____
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

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 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

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 03/18/05-80065-021 150.00

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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: *J. Raymond Valdes* 3/12/05 407-665-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #