2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCU 1. Entity Nam	MENT # J64750			Feb 20, 2006 08:00 AM Secretary of State	I
BRW ENT	TERPRISES, INC.				
Principal Plac	e at Business	Mailing Address			
1280 69TH SAINT PETE	STREET N. ERSBURG FL 33710	19 WOODVINE CT. COVINGTON LA 70433	3		
2. Principal f	Pace of Business	3. Mailing Address		111-4-112	14
Suite. Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E034 (10/05)	
City & State		City & State		4. FEI Number 59-2787967 Applied Fi	
Z)p	Country	Ziρ	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent	-
DAD	OT: CTT 1881 1884 1 10		Name		
BARTLETT, WILLIAM H JR 1280 69TH STREET NORTH ST. PETERSBURG FL 33710			Street Address	s (P.O. Box Number is Not Acceptable)	-
			<u></u>		
			City	FL Zip Code	
8. The above the obligat	named entity submits this statement folions of registered agent.	r the purpose of changing its	registered office or regist	tered agent, or both, in the State of Florida. I am familiar with, and acc	cept
SIGNATURE	Signature, typed or printed mame of registered against	and life if applicable (NOTE)	· Registered Apent signature requi	TBG when leistalativy) DATE	
After	ILE NOW!!! FEE IS \$150.00 May 1, 2006 Fee Will Be \$550.00 k Payable to Florida Department o		** * 	9. Election Campaign Financing \$5.00 May Trust Fund Contribution. Added to Fe	v Ba
1G.	OFFICERS AND			1	
			11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	VS		TT.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	95
NAME	BARTLETT, WILLIAM H.	DIRECTORS	TITLE NAME	☐ Change ☐ Ad	95
	-	DIRECTORS	TITLE		95
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12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 119, 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:

SIGNATURE

Description

2-/5-06

985-249-/200

FILED