2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Jul 21, 2005 8:00 am DOCUMENT # PQ0000Q04817 **Secretary of State** 07-21-2005 90027 032 ***150.00 A. ENTERPRISE, INC. Principal Place of Business Mailing Address 2570 SOUTH NOVA ROAD S. DAYTONA FL 32119 2570 SOUTH NOVA ROAD S. DAYTONA FL 32119 2. Principal Place of Business 3. Mailing Address 2570 S. Nova A.Enterprise 1st MOORE CR2E034 (10/04) 570 South City & State City & State Applied For 4. FEI Number 59-3652239 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 32119 Yolusia Fee Required 1010 51 G 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -IAHBTILIAR-IARBE Street Address (P.O. Box Number is Not Acceptable) 2140 S. PALMETTO AVENUE, #9 S. DAYTONA FL 32119 City Zip Code 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: d agent and title if applicable Signature, type (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Delete Change ☐ Addition DESAI, RANJITBHAI NAME NAME STREET ADDRESS 2011 OAK MEADOW CIRCLE STREET ADDRESS CITY-ST-ZIP S. DAYTONA FL 32119 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition^a NAME NAME STREET ADDRESS STREET ADDRESS CHY ST ZIP CHTY-S1-ZIP ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

FILED

ATTACHMENT SOUS 6567 # POODOOCH8 17

A Enterprise Inc
'
Dear Six,
Please find herewith
Check # 1629 Renewal
of Coxposation A. Emesprise
Inc 2570 Soull Novaki
South Day tong 16.32119
Tele. (386) 322-7189.
Thanks.
Ranjit A Desai