2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000011185

1. Entity Name
ACADIAN ENTERPRISES, INC.

Principal Place of Business	Mailing Address
9753 DEER LAKE CT. JACKSONVILLE, FL 32246	9446 PHILIPS HWY # 8 JACKSONVILLE, FL 32256

DO NOT WRITE IN THIS SPACE

02132006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-3622685	Not Applicable

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

6. Name and Address of Current Registered Agent

YEN, KUNG-PO
9446 PHILIPS HWY
8
JACKSONVILLE, FL 32256

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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_____

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, 2006 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	DPS
NAME	YEN, KUNG-PO
STREET ADDRESS	9446 PHILIPS HWY # 8
CITY-ST-ZIP	JACKSONVILLE, FL 32256
TITLE	DTV
NAME	YEN, KUNG-TI
STREET ADDRESS	9446 PHILIPS HWY # 8
CITY-ST-ZIP	JACKSONVILLE, FL 32256
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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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04/29/06-80051-008 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.

KUNG-PO YEN

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT   APR 1 4 2006   904/240 5571
Date   Daytime Phone #