## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

**Secretary of State** 05-06-2005 90101 013 \*\*\*150.00 **DOCUMENT # P02000045294** ACH ENTERPRISE, INC. Principal Place of Business Mailing Address P.O. BOX 1425 P.O. BOX 1425 66022274 SAFETY HARBOR, FL 34695 SAFETY HARBOR, FL 34695 No Chg-P CR2E034 (10/03) 01052005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 47-0862669 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent HAYES, ALLEN C DO NOT WRITE 3127 EGRET TERRACE SAFETY HARBOR, FL 34695 IN THIS SPACE 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 411cm .. Hayes (NOTE: Registried Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE HAYES, ALLEN P.O. BOX 1425 STREET ADORESS CITY-ST-ZIP SAFETY HARBOR, FL 34695 IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP HTLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP Trf1 F NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filting 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 eath; 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 SIGNATURE:

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