

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000066503

FILED
Apr 27, 2006
Secretary of State

Entity Name: POETIC ENTERPRISES, INC.

Current Principal Place of Business:

1104 BERTHA ROAD
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

1104 BERTHA ROAD
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 01-0725801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPLAN, HOWARD A
6260 DUPONT STATION COURT
SUITE C
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARTSFIELD, MICHAEL
Address: 1104 BERTHA RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: S () Delete
Name: BUTLER, DEEANDRA
Address: 246 WEST 6TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: VP () Delete
Name: THOMAS, TARUS
Address: 222 WEST CHASE ST APT 306
City-St-Zip: PENSACOLA, FL 32502

Title: T () Delete
Name: HARTSFIELD, DENITTA
Address: 593 PEMBRIDGE DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL HARTSFIELD

P

04/27/2006

Electronic Signature of Signing Officer or Director

Date