

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000084733

FILED
Mar 02, 2005
Secretary of State

Entity Name: BLACKERT ENTERPRISES, INC.

Current Principal Place of Business:

4 EASTWINDS CIRCLE
TEQUESTA, FL 334692032

New Principal Place of Business:

Current Mailing Address:

4 EASTWINDS CIRCLE
TEQUESTA, FL 334692032

New Mailing Address:

FEI Number: 30-0000871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACKERT, JOHN
4 EASTWINDS CIRCLE
TEQUESTA, FL 334692032 US

Name and Address of New Registered Agent:

BLACKERT, JOHN VP
4 EASTWINDS CIRCLE
TEQUESTA, FL 334692032 US

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: JOHN BLACKERT

03/02/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BLACKERT, CAROL
Address: 4 EASTWINDS CIRCLE
City-St-Zip: TEQUESTA, FL 334692032

Title: VD () Delete
Name: BLACKERT, JOHN
Address: 4 EASTWINDS CIRCLE
City-St-Zip: TEQUESTA, FL 334692032

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: JOHN BLACKERT

VD

03/02/2005

Electronic Signature of Signing Officer or Director

Date