


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 08, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000102103 1. Entity Name IANTHA ENTERPRISES, INC.	
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Principal Place of Business 12031 PANAMA CITY BEACH PARKWAY PANAMA CITY BEACH, FL 32407	Mailing Address 12031 PANAMA CITY BEACH PARKWAY PANAMA CITY BEACH, FL 32407
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DO NOT WRITE IN THIS SPACE



06092005 No Chg-P CR2E034 (10/03)

4. FEI Number 37-1442630	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BARLOGA, SCOTT B 220 MCKENZIE AVE PANAMA CITY, FL 32401
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**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reappointing)
Signature typed or printed name of registered agent and title if applicable _____ DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD JACKSON, IANIHA 2237 DANVER CT JONESBORO, GA 30236
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD JACKSON, EDDIE 2237 DANVER CT JONESBORO, GA 30236
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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08/08/05-80008-014 150.00

12. I 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Iantha Jackson Iantha Jackson 8-16-05 850-233-1838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #