2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2005
Secretary of State

DOCUMENT# P02000112369

Entity Name: BATHROOM SHOWER ENCLOSURES, INC.

Current Principal Place of Business:

1511 SEMINOLA BLVD.
SUITE 1089
CASSELBERRY, FL 32707

New Principal Place of Business:

1495 SEMINOLA BLVD.
SUITE 1039
CASSELBERRY, FL 32707

Current Mailing Address:

1511 SEMINOLA BLVD.
SUITE 1089
CASSELBERRY, FL 32707

New Mailing Address:

1495 SEMINOLA BLVD.
SUITE 1039
CASSELBERRY, FL 32707

FEI Number: 33-1027215 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACPHERSON, LEONILLA
1511 SEMINOLA BLVD.
SUITE 1089
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

MACPHERSON, LEONILLA
1495 SEMINOLA BLVD.
SUITE 1039
CASSELBERRY, FL 32707 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: LEONILLA MACPHERSON 03/17/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MACPHERSON, CRAIG C
Address: 1511 SEMINOLA BLVD., STE. 1089
City-St-Zip: CASSELBERRY, FL 32707

Title: D ( ) Delete
Name: MACPHERSON, LEONILLA
Address: 1511 SEMINOLA BLVD., STE. 1089
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MACPHERSON, CRAIG C
Address: 1495 SEMINOLA BLVD., STE. 1039
City-St-Zip: CASSELBERRY, FL 32707

Title: D (X) Change ( ) Addition
Name: MACPHERSON, LEONILLA
Address: 1495 SEMINOLA BLVD., STE. 1039
City-St-Zip: CASSELBERRY, FL 32707

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: LEONILLA MACPHERSON D 03/17/2005
Electronic Signature of Signing Officer or Director Date