2005 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Apr 27, 2005 08:00 AM Secretary of State DOCUMENT # P02000119900 1. Entity Name JOHN CHARLES ENTERPRISES, INC Principal Place of Business Mailing Address **5880 SHIRLEY STRET** 5880 SHIRLEY STRET **UNIT 201 UNIT 201** NAPLES, FL 34109 NAPLES, FL 34109 03302005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 35-2184822 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ASPLIN, JOHN C DO NOT WRITE **5880 SHIRLEY STREET UNIT 201** IN THIS SPACE NAPLES, FL 34109 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. Signature, typed or printed name of registered agont and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE ASPLIN, JOHN C NAME 5880 SHIRLEY STREET STREET ADDRESS U00000335599 04/27/05-80091-019 150.00 CITY-ST-ZIP NAPLES, FL 34109 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

SIGNATURE:

NAME STREET ADDRESS DITY-ST-ZIP