

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125491

FILED
Aug 30, 2005
Secretary of State

Entity Name: 4 BROTHERS ENTERPRISES OF COLLIER, INC

Current Principal Place of Business:

8933 FAWN RIDGE DRIVE
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

8933 FAWN RIDGE DRIVE
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 22-3883569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, DIAN M
1852 40TH TERRACE S.W., #B
NAPLES, FL 34116 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: ANIS, SHAWKAT
Address: 8090 S. WOODS CIRCLE, #10
City-St-Zip: FT MYERS, FL 33919

Title: VP () Delete
Name: GUDKOVA, ALBINA
Address: 8013 PANTHER TRAIL, #803
City-St-Zip: NAPLES, FL 34113

Title: T () Delete
Name: RAHMAN, SHAHIDUR
Address: 27227 PULLEN AVENUE, #A7
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S () Delete
Name: RAHMAN, MIZANUR
Address: 27227 PULLEN AVENUE, #A7
City-St-Zip: BONITA SPRINGS, FL 34135

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 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: MIZANUR RAHMAN

SEC

08/30/2005

Electronic Signature of Signing Officer or Director

Date