2005 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

Apr 25, 2005 08:00 AM Secretary of State DOCUMENT # P02000130290 BARNUM ENTERPRISES, INC. Principal Place of Business Mailing Address 6357 SPANISH MAIN DRIVE 6357 SPANISH MAIN DRIVE APOLLO BEACH, FL 33572 APOLLO BEACH, FL 33572 03072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 48-1285953 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BARNUM, JAMES DO NOT WRITE 6357 SPANISH MAIN DRIVE APOLLO BEACH, FL 33572 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution, Added to Fees 10. OFFICERS AND DIRECTORS PSD TITLE BARNUM, JAMES NAME 6357 SPANISH MAIN DRIVE STREET ADDRESS CITY-ST-ZIP APOLLO BEACH, FL 33572 ___Unnunu328906 34/25/05-80037-001 150.00 VTD TITLE BARNUM, LINDA NAME STREET ADDRESS 6357 SPANISH MAIN DRIVE CITY-ST-ZIP APOLLO BEACH, FL 33572 THTLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the Information supplied with this filling 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.

SHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED