


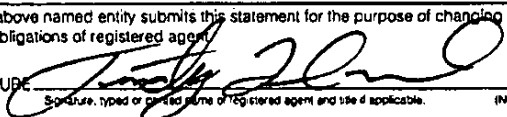
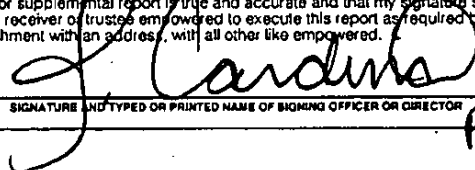
2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

05 JAN 24 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

50000480

DOCUMENT # P02000133277			
1. Entity Name P & C ENTERPRISES OF ORLANDO, INC.			
Principal Place of Business 771 S. KIRKMAN RD. #118 ORLANDO, FL 32811		Mailing Address 6658 SHADOW OAK LANE ORLANDO, FL 32809	
2. Principal Place of Business 608 Mariposa St.		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Orlando FL		City & State	
Zip 32801		Country Orange	
4. FEI Number 81-0587113		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CARDINAL, TIMOTHY 771 S. KIRKMAN RD. #118 ORLANDO, FL 32811		Name Cardinal Timothy Street Address (P.O. Box Number is Not Acceptable) 608 Mariposa St. City Orlando FL Zip Code 32801	
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 		DATE 1/5/05	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD <input type="checkbox"/> Delete	NAME CARDINAL, JENNIFER	TITLE President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME Cardinal Jennifer
STREET ADDRESS 771 S. KIRKMAN RD. #118	CITY-ST-ZIP ORLANDO, FL 32811	STREET ADDRESS 608 Mariposa St.	CITY-ST-ZIP Orlando, FL 32801
TITLE VD <input type="checkbox"/> Delete	NAME CARDINAL, TIMOTHY	TITLE Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME Cardinal Timothy
STREET ADDRESS 771 S. KIRKMAN RD. #118	CITY-ST-ZIP ORLANDO, FL 32811	STREET ADDRESS 608 Mariposa St.	CITY-ST-ZIP Orlando, FL 32801
TITLE STD <input type="checkbox"/> Delete	NAME PHARES, DENVER	TITLE	NAME
STREET ADDRESS 3504 BLUEBERRY DR	CITY-ST-ZIP LAKELAND, FL 33811	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP	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 changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date 1/5/05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR President		Date 407-87256004	