

2005
**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

13 184

FILED
05 OCT -6 AM 9:40
TALLAHASSEE, FLORIDA

05

DO NOT WRITE IN THIS SPACE
OCT 10 2005
OCT

DOCUMENT # P03000020957
1. Entity Name ENOTRIS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1632 CORNERVIEW LANE
Suite, Apt. #, etc.
City & State ORLANDO, FL
Zip 32820 Country ORANGE

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 51-0448606 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent
Name ENOTRIS BUTLER
Street Address (P.O. Box Number is Not Acceptable) 1632 CORNERVIEW LANE
City ORLANDO FL Zip Code 32820

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.

SIGNATURE  8/25/05
(NOTE: Registered Agent signature required when re-registering)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

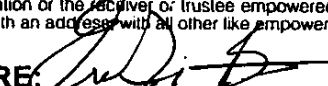
January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES /DIRECTOR ENOTRIS BUTLER 1632 CORNERVIEW LANE ORLANDO, FL 32820	TITLE NAME STREET ADDRESS CITY - ST - ZIP	500060310205 10/06/05--01063--022 **150.00
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13. 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 11 or on an attachment with an address with all other like empowered.

SIGNATURE:  ENOTRIS BUTLER 8/25/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)

11 JVC
AUGUST 25, 2005

ENOTRIS, INC.
1632 CORNERVIEW LANE
ORLANDO, FL 32820
P03-000020957
51-0448606

STATE OF FLORIDA
DIVISION OF CORPORATIONS
PO BOX 1500
TALLAHASSEE, FL 32302-1500

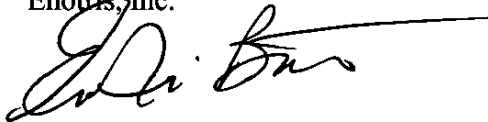
DEAR SIR OR MADAM:

ENCLOSED IS THE CORPORATION REINSTATEMENT FORM
FOR OUR COMPANY FOR 2005, AND A PAYMENT OF \$ 150.00.

THE REASON THIS FORM WAS NOT FILED PRIOR TO
MAY 1st IS THAT WE NEVER RECEIVED THE RENEWAL IN THE MAIL.

A PERSON FROM YOUR OFFICE SAID, "THAT YOU WOULD
ALLOW THIS FORM TO NOW BE FILED WITHOUT A PENALTY". THANK YOU.

VERY TRULY YOURS,
Enotris, Inc.



By: Enotris Butler, PRESIDENT