

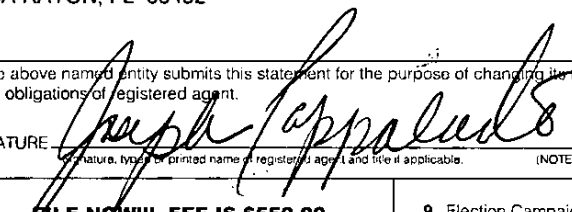
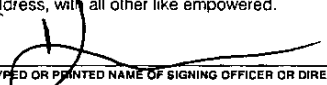


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2005 8:00 am
Secretary of State

07-08-2005 90026 010 ***550.00

DOCUMENT # P03000061046 1. Entity Name AMPRO ENTERPRISE, INC.					
Principal Place of Business 5451 NW 113 PLACE DORAL, FL 33178			Mailing Address 5451 NW 113 PLACE DORAL, FL 33178		
2. Principal Place of Business 2522 N. State Rd. 7 Suite, Apt. #, etc.		3. Mailing Address 2522 N. State Rd. 7 Suite, Apt. #, etc.			
City & State Margate FL		City & State Margate FL		6. FEI Number 20-0047895	
Zip 33063		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GERSTEIN, WILLIAM GERSTEIN & GERSTEIN ATTORNEYS, P.A. 700 S FEDERAL HIGHWAY SUITE 200 BOCA RATON, FL 33432				7. Name and Address of New Registered Agent Name J + G Accounting + Financial Services Street Address (P.O. Box Number is Not Acceptable) 2522 N. State Rd. 7 City Margate FL Zip Code 33063	
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  Joseph Pappalardo 6/30/05 <small>(Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when terminating))</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		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 NAME STREET ADDRESS CITY-ST-ZIP	DPS DULCEY ROBLEDO, CARLOS ALBERTO 5451 NW 113 PLACE DORAL, FL 33178	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS DULCEY ROBLEDO CARLOS ALBERTO 2522 N. STATE RD 7 MARGATE FL 33063	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT ROBLEDO GUTIERREZ, AMPARO 5451 NW 113 PLACE DORAL, FL 33178	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT ROBLEDO GUTIERREZ, AMPARO 2522 N. STATE RD 7 MARGATE FL 33063	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 reports 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: 			07/05/05 954-969-1655 <small>Date Daytime Phone #</small>		

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