

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 17, 2006 08:00 AM  
Secretary of State

DOCUMENT # P03000070491

1. Entity Name  
CONQUEST ENTERPRISES, INC.



Principal Place of Business  
83 DOBSON STREET  
ORLANDO, FL 32805

Mailing Address  
83 DOBSON STREET  
ORLANDO, FL 32805



04122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number  
55-0838355

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

WINDOM, JOHN H  
83 DOBSON STREET  
ORLANDO, FL 32805

DO NOT WRITE  
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)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PVT  
WINDOM, JOHN H  
83 DOBSON STREET  
ORLANDO, FL 32805

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
WINDOM, ROSA M  
83 DOBSON STREET  
ORLANDO, FL 32805

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000514513  
04/29/06-80174-015 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John H. Windom John H. Windom 4-12-06 407 702-54

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #