## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # P03000083707** 

JOHNNY B. ENTERPRISES, INC.



\_\_\_\_\_Mailing Address

230 PILGRIM RD

Principal Place of Business\_ W PALM BCH, FL 33405

230 PILGRIM RD W Palm BCH, FL 33405

**FILED** Feb 07, 2005 08:00 AM Secretary of State

CR2E034 (10/03)

Daytime Phone #



## DO NOT WRITE IN THIS SPACE

4. FEI Number 56-2399510	 Applied For Not Applicable	
5. Certificate of Status Desired	S8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BONACCORSI, JOHN 230 PILGRIM RD W PALM BCH, FL 33405

SIGNATURE:

## DO NOT WRITE

No Chg-P

01162005

		!		IIV	I NIS 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					DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees	U00000217734 02/07/05-80038-002 150.00		
10.	OFFICERS AND DIREC	TORS		The second of th			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BONACCORSI, JOHN 230 PILGRIM RD W PALM BCH, FL 33405						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS ONV. 97-201			· · · · · · · · · · · · · · · · · · ·	DO	NOT_WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		***					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby indicated of the corchanged	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empoweres , or on an attachment with an additions, with all	ling does not qualify for the exer and accurate and that my signat to execute this report as require other like empowered.	mption state ure shall haved by Chap	d in Section 119.07(3) we the same legal effect ter 607, Florida Statute	(i), Florida Statutes, I further certify that the information of as if made under oath; that I am an officer or director is; and that my name appears in Block 10 or Block 11 if		

TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR