


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 17, 2006 8:00 am**  
**Secretary of State**

04-17-2006 90363 045 \*\*\*150.00

<b>DOCUMENT # P03000114004</b> 1. Entity Name <b>ENB ACQUISITION CORP.</b>					
Principal Place of Business <b>3980 RCA BLVD STE 8012 PALM BEACH GARDENS, FL 33410</b>			Mailing Address <b>3980 RCA BLVD STE 8012 PALM BEACH GARDENS, FL 33410</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>20-0301494</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>BOLLINGER, MICHAEL R 3980 RCA BLVD STE 8012 PALM BEACH GARDENS, FL 33410</b>				7. Name and Address of New Registered Agent Name <b>Ted Tetrick</b> Street Address (P.O. Box Number is Not Acceptable) <b>3980 RCA BLVD STE 8012</b> City <b>PALM BEACH GARDENS FL</b> Zip Code <b>33410</b>	
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 <u><i>Ted A. Tetrick</i></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<b>Ted Tetrick, President &amp; Director</b>		<b>4/12/06</b> <small>DATE</small>	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> 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	D PORTER, JOSEPH T 3980 RCA BLVD STE 8012 PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SIMON, JEANNE K 3980 RCA BLVD STE 8012 PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BOLLINGER, MICHAEL R 3980 RCA BLVD STE 8012 PALM BEACH GARDENS, FL 33410	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director Ted Tetrick 3980 RCA BLVD STE 8012 PALM BEACH GARDENS FL 33410	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Ted A. Tetrick</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>Ted Tetrick</b>		<b>4/12/06</b> <b>561-776-6571</b> <small>Date Daytime Phone #</small>	