

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 30, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000151567**

1. Entity Name  
**WEBER ENTERPRISES, INC.**



Principal Place of Business  
**700 RALEIGH CT  
 DELTONA, FL 32738**

Mailing Address  
**700 RALEIGH CT  
 DELTONA, FL 32738**



03222006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **56-2422310** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional  
 Fees Required

**6. Name and Address of Current Registered Agent**

**WEBER, MIKE  
 700 RALEIGH CT  
 DELTONA, FL 32738**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**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	DPST
NAME	WEBER, MIKE
STREET ADDRESS	700 RALEIGH CT
CITY-ST-ZIP	DELTONA, FL 32738
TITLE	V
NAME	WEBER, DONALD
STREET ADDRESS	700 RALEIGH CT
CITY-ST-ZIP	DELTONA, FL 32738
TITLE	V
NAME	WEBER, MICHAEL
STREET ADDRESS	700 RALEIGH CT
CITY-ST-ZIP	DELTONA, FL 32738
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000485662  
 04/13/06-80004-004 150.00

**DO NOT WRITE  
 IN THIS SPACE**

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:** MIKE WEBER **MIKE WEBER, PRESIDENT** 3/22/06 (321) 377-1952  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone N