2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000153427

1. Entity Name
BAR-HD ENTERPRISES INC.

Principal Place of Business	Mailing Address
781 W. LUDLUM	781 W. LUDLUM
DELTONA, FL 32725	DELTONA, FL 32725

DO NOT WRITE IN THIS SPACE

01182006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
84-1633130	Not Applic:

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

6. Name . . Idress of Current Registered Agent

WILLIAMS, JOHN P
781 W. LUDLUM
DELTONA, FL 32725

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8. The above named entity submits i. . ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acc: the obligations of registered agent

SIGNATURE_____

Signature, typed or printed name of regist. . . t 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	PD
NAME	WILLIAMS, JOHN P
STREET ADDRESS	781 W. LUDLUM
CITY-ST-ZIP	DELTONA, FL 32725
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/01/06-80047-005 150.00

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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 informat 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 dire. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #