

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2005 8:00 am
Secretary of State

08-23-2005 90013 009 ***150.00

DOCUMENT # P04000024412

1. Entity Name
VAN HART ENTERPRISE, INC.



Principal Place of Business
**800 NE 20 AVE
FT LAUDERDALE, FL 33304**

Mailing Address
**800 NE 20 AVE
FT LAUDERDALE, FL 33304**

50063003



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

08092005 Chg-P CR2E034 (10/03)

4. FEI Number

20-0917860

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**VAN HART, GEORGE
800 NE 20 AVE
FT LAUDERDALE, FL 33304**

7. Name and Address of New Registered Agent

Name **Cecil Wilson**

Street Address (P.O. Box Number is Not Acceptable)

8870 TRILBY AVE

City **Jacksonville**

FL

Zip Code

32206

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 **Cecil Wilson**
Signature typed or printed name of registered agent and title if applicable

Account: **Cecil Wilson**
(NOTE: Registered Agent signature required when reinstating)

8/8/05
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **VAN HART, GEORGE**
STREET ADDRESS **800 NE 20 AVE**
CITY - ST - ZIP **FT LAUDERDALE, FL 33304**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
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CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **George Van Hart**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/18/05 **954**
Date Daytime Phone # **763-3220**