2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000044473

FILED Feb 03, 2005 8:00 am Secretary of State 02-03-2005 90038 007 ***150.00

1. Enlity Name BURIG & SONS ENTERPRISES, CORP.						02 03 2003 3	, cos c	130.00
Principal Place	e of Business	Mailing Address	Mailing Address					
2704 ANNHURST AVENUE ORLANDO, FL 32826		2704 ANNHURST AVENUE Orlando, fl. 32826			40011919			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01202005	Chg-P	CR2E034 (10/	03)
City & State		. City & State			4: FEI Numbe 20	-086016	7	Applied For Not Applicable
Zip	Country	Zip	Count	ry		of Status Desired	Fee Rec	Additional quired
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name				
BURITICA, ALBERTO 2704 ANNHURST AVENUE ORLANDO, FL 32826			Street Address (P.O. Box Number is Not Acceptable)					
ORLANDO	, FL 32020							
		City				FL Zip	Code	
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								
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees								
10.	OFFICERS AND		11.	· 1	ADDITIONS/	CHANGES TO OFFI		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURITICA, ALBERTO 2704 ANNHURST AVENUE ORLANDO, FL 32826	☐ Delete					☐ Cha	inge 🗌 Addilion
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURITICA, DAVID E 2704 ANNHURST AVENUE ORLANDO, FL 32826	☐ Delete		i			☐ Cha	ange 🔲 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURITICA, OLGA 2704 ANNHURST AVENUE ORLANDO, FL 32826	☐ Delete	1	l l			_ Cha	ange Addition
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THE SEA

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:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1,30.05

321 303 8354

Daytime Phone #