

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067382

FILED
Jul 07, 2005
Secretary of State

Entity Name: PNT ENTERPRISES OF WEST PALM BEACH, INC.

Current Principal Place of Business:

4182 LAKE TAHOE CIRCLE
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

4182 LAKE TAHOE CIRCLE
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 36-4553984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

METTLER, PETER W ESQ.
140 ROYAL PALM WAY, #202
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, SAMUEL T
Address: 4182 LAKE TAHOE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: SD () Delete
Name: PRICE, PHILLIP C II
Address: 4182 LAKE TAHOE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL T. SMITH

PD

07/07/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date