

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000069305

Entity Name: ARENKAY ENTERPRISES, INC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

175 GOLDCOAST RD., NE
PALM BAY, FL 32907 US

New Principal Place of Business:

1742 AGORA CIR., SE
2
PALM BAY, FL 32909 US

Current Mailing Address:

175 GOLDCOAST RD., NE
PALM BAY, FL 32907 US

New Mailing Address:

1742 AGORA CIR., SE
2
PALM BAY, FL 32909 US

FEI Number: 56-2464595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NUARA, RIKKI A
175 GOLDCOAST RD., NE
PALM BAY, FL 32907 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NUARA, RIKKI A
Address: 175 GOLDCOAST RD., NE
City-St-Zip: PALM BAY, FL 32907 US

Title: VP () Delete
Name: KING, NICOLE
Address: 1131 RIVER DR., NE
City-St-Zip: PALM BAY, FL 32905 US

Title: CH (X) Delete
Name: POOLE, KEITH R
Address: 7955 BABCOCK ST., SE
City-St-Zip: PALM BAY, FL 32909 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CH (X) Change () Addition
Name: POOLE, KEITH R
Address: 7955 BABCOCK ST., SE
City-St-Zip: PALM BAY, FL 32909 US

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: KEITH R. POOLE

CH

04/27/2005

Electronic Signature of Signing Officer or Director

Date