2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092701

Entity Name: BUSHKON ENTERPRISES, INC.

FILED May 03, 2005 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
815 2ND A\ RUSKIN, FL						
Current Mailing Address:			New Maili	New Mailing Address:		
PO BOX 1245 RUSKIN, FL 33575 US						
FEI Number: 2	20-2772024	FEI Number Applied For ()	FEI Number Not Appl	licable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Address of New Registered Agent:		
RIVERVIEW TAX & MORTGAGE, INC. 7039 US HWY 301 SOUTH RIVERVIEW, FL 33569 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,						
in the State						
SIGNATUR		c Signature of Registered Agent		 Date		
Election Cam		(2)(b), F.S., the corporation did not re Trust Fund Contribution(). 'ORS:	- -	e. NS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CFO () I KONITZER, BRIA PO BOX 1245 RUSKIN, FL 335		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	CEO () I BUSH, EARL JR PO BOX 1245 RUSKIN, FL 335		Title: Name: Address: City-St-Zip:	P (X) Change () Addition BUSH, JASON A PO BOX 1245 RUSKIN, FL 33575		
Title: Name: Address: City-St-Zip:	P () I BUSH, JASON A PO BOX 1245 RUSKIN, FL 335		Title: Name: Address: City-St-Zip:	T (X) Change () Addition KONITZER, MELISSA F PO BOX 1245 RUSKIN, FL 33575		
Title: Name: Address: City-St-Zip:	VP (X) BUSH, ANGELA PO BOX 1245 RUSKIN, FL 335	L	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SEC (X) BAHR, ANGELA PO BOX 1245 RUSKIN, FL 335		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T (X) KONITZER, MEL PO BOX 1245 RUSKIN, FL 335		Title: Name: Address: City-St-Zip:	()Change ()Addition		

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: BRIAN P KONITZER CFO 05/03/2005