2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# P04000164967

Entity Name: SALCEDO & DIPRIMA ENTERPRISES, INC.

Current Principal Place of Business:

5047 BONITO DRIVE
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

11736 US HWY 19 NO
PORT RICHEY, FL 34668

Current Mailing Address:

5047 BONITO DRIVE
NEW PORT RICHEY, FL 34652

New Mailing Address:

11736 US HWY 19 NO
PORT RICHEY, FL 34468

FEI Number: 75-3175534 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HAY, CEDRIC P ESQ
12312 US HIGHWAY 19 NORTH
HUDSON, FL 34667 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: D ( ) Delete
Name: SALCEDO, CRISOSTOMO
Address: 5047 BONITO DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete
Name: DIPRIMA, MARIA
Address: 2233 ARDENWOOD DRIVE
City-St-Zip: SPRING HILL, FL 34609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SALCEDO, CRISOSTOMO
Address: 5047 BONITO DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: V (X) Change ( ) Addition
Name: DIPRIMA, MARIA
Address: 2233 ARDENWOOD DRIVE
City-St-Zip: SPRING HILL, FL 34609

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: CRISOSTOMO SALCEDO P 04/30/2005

Electronic Signature of Signing Officer or Director Date