

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000167343

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Entity Name:** ENIGER ENTERPRISES, INCORPORATED

**Current Principal Place of Business:**

3906 HEALTH CIRCLE NORTH  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

3906 HEATH CIRCLE NORTH  
WEST PALM BEACH, FL 33407

**Current Mailing Address:**

3906 HEALTH CIRCLE NORTH  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

3906 HEATH CIRCLE NORTH  
WEST PALM BEACH, FL 33407

**FEI Number:** 20-2172168

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILL, REGINALD  
3906 HEALTH CIRCLE NORTH  
WEST PALM BEACH, FL 33407 US

**Name and Address of New Registered Agent:**

HILL, REGINALD  
3906 HEATH CIRCLE NORTH  
WEST PALM BEACH, FL 33407 US

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: REGINALD HILL

02/13/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HILL, REGINALD  
Address: 3906 HEALTH CIRCLE NORTH  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: SD  
Name: HILL, YVETTE M  
Address: 3906 HEALTH CIRCLE NORTH  
City-St-Zip: WEST PALM BEACH, FL 33407

I hereby 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 all other like empowered.

SIGNATURE: REGINALD HILL

PD

02/13/2012

Electronic Signature of Signing Officer or Director

Date