

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # P05000077852

1. Entity Name
CBN ENTERPRISES, INC.



Principal Place of Business
**6527 CARTMEL LANE
WINDERMERE, FL 34786**

Mailing Address
**6527 CARTMEL LANE
WINDERMERE, FL 34786**



04242007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3248725	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SIKES, RONALD W ESQ.
1000 E. ROBINSON ST., SUITE A
ORLANDO, FL 32801**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U00000740681
05/14/07-80076-018 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCEO CHADHA, RAMANDEEP S 6527 CARTMEL LANE WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CHADHA, RAMANDEEP S 6527 CARTMEL LANE WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD CHADHA, RISHIPAL S 6436 CARTMEL LANE WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD NAFTZGER, DARREN 645 27TH AVE. NORTH ST. PETERSBURG, FL 33704
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BAJWA, AJAYPARTAP 3608 AUGUSTA COURT GASTONIA, NC 28058
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ramandeep S. Chadha*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/07 407-288-4755
Date Daytime Phone #