

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144298

Entity Name: IDEHEN ENTERPRISES, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

5869 TALAVERA STREET
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

5869 TALAVERA STREET
ORLANDO, FL 32807

New Mailing Address:

FEI Number: 20-3674522

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IDEHEN, CHARLES O
5869 TALAVERA STREET
ORLANDO, FL 32807 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: IDEHEN, SARRA A
Address: 5869 TALAVERA STREET
City-St-Zip: ORLANDO, FL 32807

Title: VP () Delete
Name: IDEHEN, CHARLES O
Address: 5869 TALAVERA STREET
City-St-Zip: ORLANDO, FL 32807

Title: DIR () Delete
Name: JOHNSON, JAMES A
Address: 1200 ELM STREET, APT. 9
City-St-Zip: LANCASTER, TX 75134

Title: DIR () Delete
Name: PROCTOR, STEPHANIE D
Address: 1111 SOUTH CREEK DRIVE, APT. 628
City-St-Zip: ROUNDROCK, TX 78664

Title: DIR () Delete
Name: IDEHEN, BRYAN O
Address: 5869 TALAVERA STREET
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DIR (X) Change () Addition
Name: JOHNSON, JAMES A
Address: 3200 PARK CIRCLE DRIVE
City-St-Zip: LANCASTER, TX 75134

Title: DIR (X) Change () Addition
Name: PROCTOR, STEPHANIE D
Address: 936 DIANN CIRCLE
City-St-Zip: LANCASTER, TX 75146

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SARRA IDEHEN

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

Date