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Secretary of State
04-04-2005 90067 028 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P92000000201

1. Entity Name
GIROUX ENTERPRISES, INC.

Principal Place of Business	Mailing Address
26240 US HWY 19 NORTH CLEARWATER, FL 33761 US	26240 US HWY 19 NORTH CLEARWATER, FL 33761 US

DO NOT WRITE IN THIS SPACE

01142005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3148982
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GIROUX, ANDRE JR
26240 US HWY 19 NORTH
CLEARWATER, FL 33761

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	GIROUX, ANDRE JR
STREET ADDRESS	4308 SUSSEX ST.
CITY-ST-ZIP	HOLIDAY, FL 34691
TITLE	VS
NAME	BRYAN, MICHAEL
STREET ADDRESS	4141 SETON CIR.
CITY-ST-ZIP	PALM HARBOR, FL 34683
TITLE	V
NAME	GIROUX, JEAN
STREET ADDRESS	2438 ENTERPRISE RD. #2614
CITY-ST-ZIP	CLEARWATER, FL 33763
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Andre Giroux Jr 2/1/05 (727) 791-4247
SIGNATURE AND TYPED OR PRINTED NAME OF ADDING OFFICER OR DIRECTOR — Date — Daytime Phone #