## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 18, 2005 08:00 AM

DOCUMENT # P94000062019  1. Entity Name VICTOR ENTERPRISES, INCORPORATED  Principal Place of Business  798 NW 82ND AVE, CORAL SPRINGS, FL 33071  DO NOT WRITE IN THIS SPACE				O2142005 No Chg-P CR2E034 (10/03)  4. FEI Number		
	6. Name and Address of Current Regis					
VICTOR, BARRY D 798 NW 82ND AVE. CORAL SPRINGS, FL 33071			DO NOT WRITE IN THIS SPACE			
8. The above	named entity submits this statement for the	purpose of changing its registere	d office or register	ed agent, or both, in th	e State of Florida. I am i	amiliar 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, 2005 Fee will be \$550.00  S. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees						
10.	OFFICERS AND DIRE	CTORS				
NAME STREET ADDRESS CITY-ST-ZIP	CP VICTOR, BARRY D 798 NW 82 AVE. CORAL SPRINGS, FL 33071	·		ctb	//////////////////////////////////////	1-001 150 00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ا اور یا دستان	=			
TITLE						
NAME STREET ADDRESS CITY-ST-ZIP		For the second s	<u></u>		T WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THI	S SPACE	
TITLE						
NAME STREET ADDRESS CITY-ST-ZIP			<del></del> -		<del></del>	
TITLE NAME		· · · · · · · · · · · · · · · · · · ·				
STREET ADDRESS						
CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date						