2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 24, 2005
Secretary of State

DOCUMENT# P95000036880

Entity Name: FIX IT! ENTERPRISES, INC.

Current Principal Place of Business:

1217 N.E. 4 PLACE
CAPE CORAL, FL 33909

New Principal Place of Business:

Current Mailing Address:

1217 N.E. 4 PLACE
CAPE CORAL, FL 33909

New Mailing Address:

FEI Number: 65-0581678 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: KAUFMAN, MARK J
Address: 1217 N.E. 4 PLACE
City-St-Zip: CAPE CORAL, FL 33909

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: KAUFMAN, MARK J
Address: 1217 N.E. 4 PLACE
City-St-Zip: CAPE CORAL, FL 33909

Title: S ( ) Change (X) Addition
Name: HAYSLIP, DAWN R
Address: 1217 N.E 4TH PLACE
City-St-Zip: CAPE CORAL, FL 33909

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK J KAUFMAN PTD 08/24/2005

Electronic Signature of Signing Officer or Director Date