

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000036880

Entity Name: FIX IT! ENTERPRISES, INC.

FILED
Mar 17, 2006
Secretary of State

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () 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 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: MARK KAUFMAN

PTD

03/17/2006

Electronic Signature of Signing Officer or Director

Date