

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000053115

Entity Name: SOHO ENTERPRISES, INC.

FILED
Apr 08, 2004
Secretary of State

Current Principal Place of Business:

535 WHITECAP COVE COURT
DEBARY, FL 32713 US

New Principal Place of Business:

3075 ENTERPRISE RD
A-4
DEBARY, FL 32713 US

Current Mailing Address:

P. O. BOX 5698
DELTONA, FL 32728 US

New Mailing Address:

FEI Number: 59-3325539

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOHANEY, DAVID
535 WHITECAP COVE COURT
DEBARY, FL 32713 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: SOHANEY, DEBORAH
Address: 535 WHITECAP COVE COURT
City-St-Zip: DEBARY, FL 32713

Title: ST () Delete
Name: SOHANEY, DAVID
Address: 535 WHITECAP COVE COURT
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DAVID F SOHANEY

ST

04/08/2004

Electronic Signature of Signing Officer or Director

Date