2004 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P97000068908 1. Entity Name SFH ENTERPRISES, INC.

Principal Place of Business

2813 S HIAWASSEE

STE 108B ORLANDO, FL 32835 Mailing Address

P.O. BOX 730 WINDERMERE, FL 34786

FILED Feb 09, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

I. FE! Number	Applied For
59-3461317	Not Applicable

5. Certificate of Status Desired

01062004

\$8.75 Additional Fee Required

CR2E034 (10/03)

HUBER, SUSAN F 2813 S HIAWASSEE STE 108B

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

ORLANDO), FL 32835		IN THIS SPACE		
	named entity submits this statement for the plants of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE, Registered	Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ny 1, 2004 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUBER, SUSAN F 8038 WHITFORD CT WINDERMERE, FL 34786				<u> </u>
TITLE NAME STREET ADDRESS GITY-ST-ZIP					02/11/04-80016-021 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS GITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby indicated of the co-	certify that the information subplied with this fi I on this report or supplemental report is true- poration or the receiver of pristee empowere , or on an axachment with an address, with al	iling does not qualify for the exe and accorate and that my signa d to execute this report as requi Il other like empowered	mption state ture shall ha red by Chap	d in Section 119.07(3) ve the same legal effe iter 607, Florida Statut	(i), Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if