2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 21, 2005 8:00 am **Secretary of State** DOCUMENT # P97000094185 1. Entity Name 03-21-2005 90101 034 ***158.75 R & K HUGHES ENTERPRISES, INC. Principal Place of Business Mailing Address 124 VIRGINIA ROAD 124 VIRGINIA RD. WEST MELBOURNE FL' 32904 MELBOURNE FL 32904 2. Principal Place of Business 2057 Kanch And Acres K Suite, Apt. #, etc. 3. Mailing Address, 2057 Kanchland Acres Rd. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State LAKE/And LAKELAND. Applied For 4. FEI Number 59-3511045 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HUGHES, KAREN 124 VIRGINIA ROAD Street Address (P.O. Box Number is Not Acceptable) WEST MELBOURNE FL 32904 RAnchland Acres 8. 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. I am familiar with, and accept the obligations of registered agent. 3-16-05 DATE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. PD TITLE 2 Change ☐ Addition TITLE Detete Hughes, Ronald A HUGHES, RONALD A NAME NAME 2057 RANCH LAND ACRES Rd STREET ADDRESS 124 VIRGINIA RD STREET ADDRESS LAKEIANd, 71. 33809 CITY-ST-ZIP WEST MELBOURNE FL 32904 CITY-ST-ZIP TITLE F Detete TITLE Addition Hughes, Karen 2057 Ranchland Acres Rd NAME HUGHES, KAREN NAME STREET ADDRESS 124 VIRGINIA RD STREET ADDRESS LAKE/And, 71. 33809 CITY-ST-ZIP WEST MELBOURNE FL 32904 CITY-ST-7IP ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-7IP Detete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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.

KAren Hughes 3-16-05 863 660 5522SIGNING OFFICER OR DIRECTOR

Date Daytime Prone &

FILED