## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000002018

City-St-Zip:

DETROIT, MI 48227

Entity Name: BEARD ENTERPRISES, INC.

FILED Jul 18, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 14311 N. NEBRASKA AVE TAMPA, FL 33613 **Current Mailing Address: New Mailing Address:** 14311 N. NEBRASKA AVE TAMPA, FL 33613 FEI Number: 59-3489182 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JANEZIC, JOSEPH A USACCOUNTING OFFICE 4815 E. BUSCH BLVD. STE. 113 4815 E. BUSCH BLVD. STE. 207 TAMPA, FL 33617 TAMPA, FL 33617 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: JOSEPH JANEZIC 07/18/2005 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BEARD, WILLIE Name: Name: 14311 N. NEBRASKA AVE Address: Address: City-St-Zip: TAMPA, FL 33613 City-St-Zip: ( ) Delete Title: VΡ Title: () Change () Addition BEARD, KAREN Name: Name: 917 WEST PATTERSON STREET Address: Address: TAMPA, FL 33604 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition FOSTER, GLENN Name: Name: 14367 PREVOST Address: Address:

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 Statutés. 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.

City-St-Zip:

Ρ SIGNATURE: WILLIE BEARD 07/18/2005