2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000034089

Entity Name: HUBER ENTERPRISES OF NAPLES, INC.

FILED Apr 05, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2180 39TH STREET SW NAPLES, FL 34117

Current Mailing Address: New Mailing Address:

2180 39TH STREET SW NAPLES, FL 34117

FEI Number: 59-3568363 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:

ALVAREZ, JUAN C
100 10TH AVE NE
NAPLES, FL 34120 US
ALVAREZ, OLGA
2180 39TH ST SW
NAPLES, FL 34117 US

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: OLGA ALVAREZ 04/05/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ALVAREZ, HUBER
 Name:
 ALVAREZ, OLGA

 Address:
 3180 39TH STREET SW
 Address:
 3180 39TH STREET SW

 City-St-Zip:
 NAPLES, FL 34117
 City-St-Zip:
 NAPLES, FL 34117

Title: V () Delete Title: V (X) Change () Addition

 Name:
 ALVAREZ, JUAN C
 Name:
 ALVAREZ, JOSE D

 Address:
 100 10TH AVENUE NE
 Address:
 100 10TH AVENUE NE

 City-St-Zip:
 NAPLES, FL 34120
 City-St-Zip:
 NAPLES, FL 34120

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 ALVAREZ, ERICKSON

 Address:
 Address:
 3180 39TH STREET SW

 City-St-Zip:
 City-St-Zip:
 NAPLES, FL 34117

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: OLGA ALVAREZ P 04/05/2005