


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2005 8:00 am
Secretary of State

03-15-2005 90038 027 ***150.00

DOCUMENT # P99000093824			
1. Entity Name DAVID ROBERTS ENTERPRISE INC.			
Principal Place of Business 5752 MARKEL ST. PALM CITY, FL 34990		Mailing Address 5752 MARKEL ST. PALM CITY, FL 34990	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ROBERTS, DAVID 5752 MARKEL ST PALM CITY, FL 34990		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBERTS, DAVID 5752 MARKET ST PALM CITY, FL 34990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. Victor Levern Roberts 1140 1ST AVE DELMAR, DE 19824 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.			
SIGNATURE: x <i>David Roberts</i> DAVID ROBERTS PRES 2-28-05		Date: 2-28-05 Daytime Phone #: 288-3400	

50026724



03012005 Chg-P CR2E034 (10/03)

4. FEI Number 65-0958667 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

ATTACHMENT # P990000093824
50026724

MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE
Larry C. O'Steen, Tax Collector, P.O. Box 8013, Stuart, FL 34995
(772) 288-5604

LICENSE 1992-275-078 CERT _____
PHONE (772) 288-3400 SIC NO 001999
LOCATION 5752 SW MARKEL ST MAR

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	<u>.00</u>	LC. FEE \$	_____
\$	<u>.00</u>	PENALTY \$	_____
\$	<u>.00</u>	COL. FEE \$	_____
\$	<u>.00</u>	TRANSFER \$	_____
TOTAL			<u>25.00</u>



IS HEREIN RECEIVED THE SUM OF _____ DOLLARS BY _____ OF _____
DISTRIBUTOR/EPICORE/METAL

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE
06 DAY OF OCTOBER 04
AND ENDING SEPTEMBER 30, 2005

RECEIPT OF PAYMENT
LARRY C. O'STEEN
99 10/06/2004 0021 MONROE
19927500070000
0220011000002500

DAVID
ROBERTS ENTERPRIS I
MARKEL ST
CITY FL 34990



NUMBER

2

SHARES

50

DAVID ROBERTS ENTERPRISE INC.

This Certifies that VICTOR LEVERN ROBERTS is the registered holder of 50 Shares transferable only on the books of the Corporation by the holder hereof in person or by Attorney upon surrender of this Certificate properly endorsed.

In Witness Whereof, the said Corporation has caused this Certificate to be signed by its duly authorized officers and its Corporate Seal to be hereunto affixed this 1 day of FEBRUARY A.D. 2005.