

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S53817

FILED  
Jan 30, 2007  
Secretary of State

Entity Name: E B G ENTERPRISES INC.

**Current Principal Place of Business:**

5610 N ARMENIA AVE  
TAMPA, FL 33603

**New Principal Place of Business:**

2507 W HIAWATHA ST  
TAMPA, FL 33614

**Current Mailing Address:**

5610 N ARMENIA AVE  
TAMPA, FL 33603

**New Mailing Address:**

2507 W HIAWATHA ST  
TAMPA, FL 33614

FEI Number: 59-3066782      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRIFFIN, E.B. JR.  
3200 LOIS CT.  
LAND O'LAKES, FL 34639      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GRIFFIN, E.B. JR.,  
Address: 3200 LOIS CT.  
City-St-Zip: LAND O'LAKES, FL

Title: V ( ) Delete  
Name: GRIFFIN, ELIZABETH D.,  
Address: 3200 LOIS CT.  
City-St-Zip: LAND O'LAKES, FL

Title: ST ( ) Delete  
Name: MARTINEZ, RAY  
Address: 8922 DONNA LU DR  
City-St-Zip: ODESSA, FL 33556

Title: CMO ( ) Delete  
Name: MARTINEZ, SHELBY  
Address: 8922 DONNA LU DR  
City-St-Zip: ODESSA, FL 33556

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CDO ( ) Change (X) Addition  
Name: WOLDEN, KLINT  
Address: 6023 FRISCO RD.  
City-St-Zip: BROOKSVILLE, FL 34602

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: E.B. GRIFFIN JR.

Electronic Signature of Signing Officer or Director

PRES

01/30/2007

\_\_\_\_\_ Date