

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000079964

FILED
Apr 26, 2004
Secretary of State

Entity Name: UNLIMITED ENTERPRISES GROUP, INC.

Current Principal Place of Business:

26121 SW 130TH AVE
HOMESTEAD, FL 33032

New Principal Place of Business:

Current Mailing Address:

26121 SW 130TH AVE
HOMESTEAD, FL 33032

New Mailing Address:

FEI Number: 54-2065037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, ADOLFO F
26121 SW 130TH AVE
HOMESTEAD, FL 33032

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: D () Delete
Name: ADOLFO, GARCIA
Address: 2621 SW 130TH AVE.
City-St-Zip: HOMESTEAD, FL 33032

Title: D () Delete
Name: DIAZ, ALBERTO
Address: 14324 SW 136TH CT.
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: ALEXIS, GARCIA
Address: 26121 SW 130TH AVE.
City-St-Zip: HOMESTEAD, FL 33032

Title: D () Delete
Name: DIAZ SIVTO, ALBERTO
Address: 60 SW 63 CT.
City-St-Zip: MIAMI, FL 33144

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:

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: ADOLFO GARCIA

D

04/26/2004

Electronic Signature of Signing Officer or Director

Date