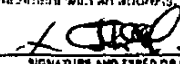


2005 FOR PROFIT CORPORATION ANNUAL REPORT

5/1

FILED
Jun 03, 2005 8:00 am
Secretary of State

05-18-2005 90026 038 ***150.00

DOCUMENT # P04000116379					
1. Entity Name YULY ENTERPRISES INC.					
Principal Place of Business 1159 N.W. 22 AVE MIAMI, FL 33125			Mailing Address 1159 N.W. 22 AVE MIAMI, FL 33125		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 38-3706422				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DIAZ, JORGE L 2715 S.W. 33 CT MIAMI, FL 33133			7. Name and Address of Now Registered Agent Name: Street Address (If A.U. box number is not applicable): 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 the stated agent.					
SIGNATURE _____ DATE _____					
FILE NOW!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution: ☐ \$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-STATE-ZIP	PST DIAZ, JORGE L 1159 N.W. 22 AVE MIAMI, FL 33125	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information included 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 as an attachment with an address with all other fee empowered.					
SIGNATURE: 		Date: 05/09/05 305-691-9028			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

66021065

05112005 Chg-P CR2E034 (10/03)