2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G36907

FILED Apr 30, 2004 Secretary of State

Entity Name: PRIME ENTERPRISES INC.

Littly Nai	IIIE. FRIIVICEI	VIERPRIOLO, INC.			
Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
16363 NW MIAMI LAK	' 49 AVE (ES, FL 33014				
Current M	lailing Addres	s:	New Mailing Address	New Mailing Address:	
16363 NW MIAMI LAK	49 AVE (ES, FL 33014				
FEI Number:	: 59-2289106	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:	
	, M / 49TH AVE 8, FL 33014	US	BARAKAT, M 16363 NW 49TH AVE MIAMI, FL 33014 L	S	
	named entity see of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				04/30/2004	
	Electron	ic Signature of Registered Age	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (X) BARAKAT, BAR 16363 NW 49 A MIAMI LAKES, I	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVT () BARAKAT, MAG 16363 NW 49 A MIAMI LAKES, F	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () BARAKAT, MOH 16363 NW 49 A MIAMI LAKES, I	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVS () LINARES, FRAN 16363 NW 49 A MIAMI LAKES, F	VE	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: MOHAMED BARAKAT P 04/30/2004