2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J87647

1. Entity Name
BEARS FAMILY ENTERTAINMENT INC.

Principal Place of Business	Mailing Address
7632 NW-186 ST.	7632 NW-186 ST.
MIAMI, FL- 33015	MIAMI, FL 33015

DO NOT WRITE IN THIS SPACE

04062004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-2836748	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. **Name and Address of Current Registered Agent**

GIL, ROBERTO F.
7632 NW 186 ST.
MIAMI, FL 33015

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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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!! FEE IS $150.00 After May 1, 2004 Fee will be $550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	

10. **OFFICERS AND DIRECTORS**

TITLE	P
NAME	ORTEGA, ALEX
STREET ADDRESS	7908 NW 40TH ST
CITY-ST-ZIP	DAVIE, FL

TITLE	STD
NAME	GIL, ROBERTO F.
STREET ADDRESS	6311 NW 198 TERR.
CITY-ST-ZIP	MIAMI, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _____ *Alex Ortega* PRESIDENT   305-557-1883

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #