2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008413

FILED Apr 06, 2004 Secretary of State

Entity Name: EDUCATIONAL ENTERTAINMENT ENTERPRISES, INC.

Current Principal Place of Business: New Principal Place of Business:

13411 S.W. 112TH LANE MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

13411 S.W. 112TH LANE MIAMI, FL 33186

FEI Number: 87-0708853 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GAIL, JUDY 13411 S.W. 112TH LANE MIAMI, FL 33186 US

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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

e: P () Delete Title: P/T (X) Change () Addition me: GAIL, JUDY Name: GAIL, JUDY

 Name:
 GAIL, JUDY
 Name:
 GAIL, JUDY

 Address:
 13411 S.W. 112TH LANE
 Address:
 13411 S.W. 112TH LANE

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: VP () Delete Title: VP/S (X) Change () Addition

 Name:
 AYVAR, CARRIE S
 Name:
 AYVAR, CARRIE S

 Address:
 1829 N.E. 179TH STREET
 Address:
 1829 N.E. 179TH STREET

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33162
 City-St-Zip:
 NORTH MIAMI BEACH, FL 33162

Title: T/S () Delete Title: VP (X) Change () Addition

 Name:
 SILVERBLATT, ALICE H
 Name:
 SILVERBLATT, ALICE H

 Address:
 20605 N.E. 7TH COURT
 Address:
 20605 N.E. 7TH COURT

 City-St-Zip:
 MIAMI, FL 33179
 City-St-Zip:
 MIAMI, FL 33179

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDY GAIL P/T 04/06/2004