2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003
Secretary of State

DOCUMENT# P00000018607

Entity Name: TKM ENTERPRISE INC.

Current Principal Place of Business:

14449 SW 95 TERRACE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

14449 SW 95 TERRACE
MIAMI, FL 33186

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, TERESITA
14449 SW 95 TERRACE
MIAMI, FL 33186

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: COB ( ) Delete
Name: MILLER, KIM I COB
Address: 8500 SW 117 ROAD SUITE 120
City-St-Zip: MIAMI, FL 33183

Title: TRS ( ) Delete
Name: MILLER, KIM I TRS
Address: 8500 SW 117 ROAD SUITE 120
City-St-Zip: MIAMI, FL 33186

Title: PRES ( ) Delete
Name: MILLER, TERESITA J PRES
Address: 8500 SW 117 ROAD SUITE 120
City-St-Zip: MIAMI, FL 33186

Title: VP ( ) Delete
Name: MILLER, KIM I VP
Address: 8500 SW 117 ROAD SUITE 120
City-St-Zip: MIAMI, FL 33186

Title: SEC ( ) Delete
Name: MILLER, TERESITA J SEC
Address: 8500 SW 117 ROAD SUITE 120
City-St-Zip: MIAMI, FL 33186

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:

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: KIM MILLER VP 04/30/2003

Electronic Signature of Signing Officer or Director — Date