


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000043107 1. Entity Name P & E FUTURE, INC.	
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Principal Place of Business 1540 SOUTH DIXIE HWY. CORAL GABLES, FL 33146	Mailing Address 1540 SOUTH DIXIE HWY. CORAL GABLES, FL 33146
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DO NOT WRITE IN THIS SPACE



03292004

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4. FEI Number 65-1007122	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 <small>00000000000000000000</small>

6. Name and Address of Current Registered Agent ACCOUNTANT & MANAGEMENT 3899 NW 7TH STREET SUITE 202 B MIAMI, FL 33126
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**DO NOT WRITE
IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 <small>00000000000000000000</small>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MOW TAI, YAN 15598 SW 109 TERR MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD KAM LING, WU 15598 SW 109 TERR MIAMI, FL 33196
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04/19/04-80101-009 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Mow Tai Yan</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>April 16, 04</u> <u>(305) 666-2593</u> <small>Date Daytime Phone #</small>
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