2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2004
Secretary of State

DOCUMENT# P01000000001

Entity Name: CASA ENTERPRISES, INC.

Current Principal Place of Business:

P. O. BOX 351756
PALM COAST, FL 32135

New Principal Place of Business:

103 BRUSHWOOD LANE
PALM COAST, FL 32137

Current Mailing Address:

P. O. BOX 351756
PALM COAST, FL 32135

New Mailing Address:

103 BRUSHWOOD LANE
PALM COAST, FL 32137

FEI Number: 59-3686673 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VOST, MARK R
103 BRUSHWOOD LANE
PALM COAST, FL 32137 US

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: PD ( ) Delete
Name: VOST, MARK
Address: 103 BRUSHWOOD LANE
City-St-Zip: PALM COAST, FL 32137

Title: VPD ( ) Delete
Name: VINNICK, BRUCE
Address: 10 CAMEO COURT
City-St-Zip: PALM COAST, FL 32137

Title: D ( ) Delete
Name: VINNICK, SHANNON
Address: 10 CAMEO COURT
City-St-Zip: PALM COAST, FL 32137

Title: D ( ) Delete
Name: VOST, MARGARITA
Address: 103 BRUSHWOOD LANE
City-St-Zip: PALM COAST, FL 32137

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:

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: MARK R. VOST PD 02/03/2004

Electronic Signature of Signing Officer or Director — Date