2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Feb 23, 2004 08:00 AM Secretary of State DOCUMENT # P01000008514 1. Entity Name ENTERPRISE PERFORMANCE STRATEGIES, INC. Principal Place of Business Mailing Address 6023 26 ST W. #145 6023 26 ST W, #145 BRADENTON, FL 34207 BRADENTON, FL 34207 02122004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1072084 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ENRICO, PETER DO NOT WRITE 6023 26 ST W, #145 BRADENTON, FL 34207 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rainstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME ENRICO, PETER 6023 26 ST W, #145 STREET ADDRESS Un0000062401 CITY-ST-ZIP BRADENTON, FL 34207 -02/29/04-80119-011 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 of charged, or on an attachment with an address, with all other like empowered.

AME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #