2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P01000073849

1. Entity Name
JILK WAREHOUSES, INC.

Principal Place of Business	Mailing Address
7162 SW 41 ST MIAMI, FL 33155	PO BOX 558087 MIAMI, FL 33255

DO NOT WRITE IN THIS SPACE

01052004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-1135830	Not Applicat.

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JORGE, GONZALEZ
7280 NW 8TH STREET
MIAMI, FL 33126

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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 accep the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2004 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	GONZALEZ, JORGE
STREET ADDRESS	7280 NW 8TH STREET
CITY-ST-ZIP	MIAMI, FL 33126

TITLE	D
NAME	GONZALEZ, LILLIAN S
STREET ADDRESS	7280 NW 8TH STREET
CITY-ST-ZIP	MIAMI, FL 33126

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01/12/04-80017-019 150.00

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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)(i), 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: _____ Jorge Gonzalez/President 1/6/04 305-663-0322

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #