


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90183 028 ***150.00

DOCUMENT # P01000074381	
1. Entity Name FOREVER YOUNG VILLAS, INC.	

Principal Place of Business 9051 SUNSET STRIP SUNRISE FL 33322	Mailing Address 9051 SUNSET STRIP SUNRISE FL 33322
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94069673



MOORE CR2E034 (11/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 01-0619025	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SEUNERINE, JAMES 9051 SUNSET STRIP SUNRISE FL 33322

7. Name and Address of New Registered Agent	
Name JACINTA SEUNARINE	Street Address (P.O. Box Number is Not Acceptable) 9051 SUNSET STRIP
City SUNRISE	FL Zip Code 33322

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 <i>Jacinta Seunarine</i>	DATE 4.23.04

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE D	<input checked="" type="checkbox"/> Delete
NAME SEUNARINE, JAMES	
STREET ADDRESS 9051 SUNSET STRIP	
CITY-ST-ZIP SUNRISE FL 33322	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE JACINTA SEUNARINE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME JACINTA SEUNARINE	
STREET ADDRESS 9051 SUNSET STRIP, SUNRISE, FL	
CITY-ST-ZIP 33322	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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)(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: <i>Jacinta Seunarine</i>	DATE 4.23.04	Daytime Phone # 954-742-9857
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