


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000094190 1. Entity Name NAV ENTERPRISES, INC.	
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 04 MAY 11 AM 8:54
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business 5779 NW 151 STREET MIAMI, FL 33014	Mailing Address 5779 NW 151 STREET MIAMI, FL 33014
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2. Principal Place of Business 14160 Palmetto Frontage Rd. Suite, Apt. #, etc. 21	3. Mailing Address 14160 Palmetto Frontage Rd. Suite, Apt. #, etc. 21
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03282004 Chg-P CR2E034 (10/03)

City & State Miami Lakes, FL	City & State Miami Lakes, FL
Zip 33016	Zip 33016

4. FEI Number 01-0550366	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 VEGA, ALEXANDER 5779 NW 151 STREET MIAMI, FL 33014

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete
NAME	VEGA, ALEXANDER
STREET ADDRESS	5779 NW 151 STREET
CITY-ST-ZIP	MIAMI, FL 33014
TITLE	D <input type="checkbox"/> Delete
NAME	VEGA, NICOLE
STREET ADDRESS	5779 NW 151 STREET
CITY-ST-ZIP	MIAMI, FL 33014
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	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vega, Alexander
STREET ADDRESS	14160 Palmetto Frontage Rd. #21
CITY-ST-ZIP	Miami Lakes, FL 33016
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vega, Nicole
STREET ADDRESS	14160 Palmetto Frontage Rd. #21
CITY-ST-ZIP	Miami Lakes, FL 33016
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: Alexander Vega 4/30
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) Daytime Phone #