2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000104625

Entity Name: ERIN-LEIGH ENTERPRISES, INC.

FILED Jan 12, 2004 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

3617 CROWN POINT RD SUITE 2 JACKSONVILLE, FL 32257 1111-21 SAN JOSE BLVD JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

PO BOX 24668

JACKSONVILLE, FL 322414688

FEI Number: 59-3752474 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HERNANDEZ, MEREDITH A 3617 CROWN POINT RD SUITE 1 JACKSONVILLE, FL 32257 HERNANDEZ, MEREDITH A 3617 CROWN POINT RD SUITE 2

JACKSONVILLE, FL 32257

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: MEREDITH ALLEN HERNANDEZ 01/12/2004

Electronic Signature of Registered Agent Date

Title:

Name:

Address:

Address:

City-St-Zip:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

Title: DP () Delete

 Name:
 RAMIREZ, PATRICIA K

 Address:
 POST OFFICE BOX 24668

 City-St-Zip:
 JACKSONVILLE, FL 322414668

Title: DST () Delete Title: () Ch

 Name:
 RAMIREZ, BRÚCE E

 Address:
 POST OFFICE BOX 24668

 City-St-Zip:
 JACKSONVILLE, FL 322414668

Title: () Change () Addition Name:

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: BRUCE RAMIREZ D 01/12/2004