## - 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED
Mar 06, 2004 08:00 AM
Secretary of State

1. Entity Nam J & J LIL	ENTERPRISES, INC.				Se	cretary	oi Stat
Principal Place 9098 136Th SEMINOLE, F	ISTN	Mailing Address 9098 136TH ST N SEMINOLE, FL 33776				,	
DO NOT WRITE IN THIS SPACE  6. Name and Address of Current Registered Agent				01192004 No Chg-P CR2E034 (10/03)  4. FEI Number			
WATKINS, CARL T 5103 MEMORIAL HWY TAMPA, FL 33634				DO NOT WRITE 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  Signature, typed or printed name of registered agent and little 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 Campaig Trust Fund Contri				5.00 May Be aided to Fees	0000000 00000000		
10. HILE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF D LILLICO, JANET A 9098 136TH ST N SEMINOLE, FL 33776	ECTORS				ນບະຊ-ຍຍ (	150.00
TITLE NAME SIREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WI		
NAME STREET ADDRESS CITY-ST-ZIP WILE NAME STREET ADDRESS							
of the cor	pertify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empower or on an attachment with an address, with	red to execute this report as requi	mption stated in Stated in State the shall have the red by Chapter 6	Section 119.07(3)( e same legal effec 07, Florida Statute	i), Florida Statutes. I fi tt as if made under oa es; and that my name :	urther certify that the thing that the that I am an off appears in Block 1	he information icer or director 0 or Block 11 if