2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000008352

Entity Name: MININ & SONS ENTERPRISE, INC.

FILED Feb 12, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9692 LOBLOLLY PINE CIRCLE 4344 FLORA VISTA DR ORLANDO, FL 32837 ORLANDO, FL 32837

Current Mailing Address: New Mailing Address:

9692 LOBLOLLY PINE CIRCLE 4344 FLORA VISTA DR ORLANDO, FL 32837 ORLANDO, FL 32837

FEI Number: 04-3643088 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:

ROMAN, JOSE F ROMAN, RICARDO 9692 LOBLOLLY PINE CIRCLE 4344 FLORA VISTA DR ORLANDO, FL 32837 ORLANDO, FL 32837

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: RICARDO ROMAN 02/12/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ROMAN, JOSE F
 Name:
 ROMAN, RICARDO

 Address:
 9692 LOBLOLLY PINE CIRCLE
 Address:
 4344 FLORA VISTA DR

 City-St-Zip:
 ORLANDO, FL 32837
 City-St-Zip:
 ORLANDO, FL 32837

Title: VP (X) Delete Title: () Change () Addition

 Name:
 MENDEZ, MIERVA
 Name:

 Address:
 9692 LOBLOLLY PINE CIRCLE
 Address:

 City-St-Zip:
 ORLANDO, FL 32837
 City-St-Zip:

Title: TS () Delete Title: ST (X) Change () Addition

 Name:
 ROMAN, RICARDO
 Name:
 ROMAN, DAMÁRIS

 Address:
 4344 FLORA VISTA DR
 Address:
 4344 FLORA VISTA DR

 City-St-Zip:
 ORLANDO, FL 32837
 City-St-Zip:
 ORLANDO, FL 32837

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: RICARDO ROMAN P 02/12/2004