

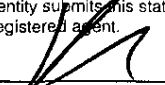
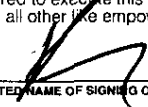


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90385 009 ***150.00

DOCUMENT # P02000020155 1. Entity Name ENERLOOK SOLUTIONS, INC.					
Principal Place of Business 550 W CYPRESS CREEK RD. SUITE 120 FT LAUDERDALE, FL 33309			Mailing Address 550 W CYPRESS CREEK RD. SUITE 120 FT LAUDERDALE, FL 33309		
2. Principal Place of Business 500 W CYPRESS CREEK RD		3. Mailing Address 500 W. CYPRESS CREEK RD.			
Suite, Apt. #, etc. SUITE 100		Suite, Apt. #, etc. SUITE 100		04232004 Chg-P CR2E034 (10/03)	
City & State FT. LAUDERDALE, FL		City & State FT. LAUDERDALE, FL		4. FEI Number 04-3603959	
Zip 33309		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. ONE SE THIRD AVENUE 28TH FLOOR MIAMI, FL 33131				7. Name and Address of New Registered Agent Name RONALD STEWART Street Address (P.O. Box Number is Not Acceptable) 500 W. CYPRESS CREEK RD., STE. 100 City FT. LAUDERDALE, FL Zip Code 33309	
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  RONALD STEWART 04/29/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees <small>Trust Fund Contribution.</small>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZOI, MIKE 550 W CYPRESS CREEK ROAD SUITE 120 FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUBROVSKY, EDWARD 210 BRANNAN STREET #17J SAN FRANCISCO, CA 94107	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOVAK, PETER 550 W CYPRESS CREEK ROAD SUITE 120 FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO LIGHT, LARRY 6261 NW 6TH WAY, SUITE 207 FT. LAUDERDALE, FL 33309	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEWART, RONALD 500 W. CYPRESS CREEK RD., STE. 100 FT. LAUDERDALE, FL 33309	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE 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 life empowered.					
SIGNATURE:  RONALD STEWART 04/29/04 (954) 556-4020 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					