2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

DOCUMENT # P02000064839 04 JUN 21 PM 3:13 1. Entity Name JAFFARIA, INC. Principal Place of Business Mailing Address 8880 SW 97TH AVE 8880 SW 97TH AVE MIAMI, FL 33176 MIAMI, FL 33176 03112003 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 30-0085679 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent FILINGS, INC. DO NOT WRITE 3732 NW 16 ST FT LAUDERDALE, FL 33311 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 (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 500038554885 Added to Fees (701/04--01046--006 **150.00 FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing Trust Fund Contribution. Due by September 8, 2004 OFFICERS AND DIRECTORS 10. TITLE BHAYANI, YUSEF A NAME 8880 SW 97TH AVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33176 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 of tustee 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 ah address, with all other like empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #