2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081210

Entity Name: YOSHI ENTERPRISES INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1540 WELL 13	S ROAD						
ORANGE PARK, FL 32073 US							
Current Mailing Address:				New Mailing Address:			
1540 WELLS ROAD 13 ORANGE PARK, FL 32073 US							
FEI Number: 52-2368530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)							
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
LOVE, JAMES F II 9252 GREENLEAF ROAD JACKSONVILLE, FL 32208 US 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:							
Electronic Signature of Registered Agent Date							
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:							
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	STEWART, JI 11011 HARTS JACKSONVIL CFO (FLETCHER, I 3856 O'REIL' JACKSONVIL COO (JILES, JOHN) 8451 GULLEG JACKSONVIL	S ROAD # LE, FL 3 () Delete DWAYNE Y DRIVE LE, FL 3 () Delete NIE JR. GE DRIVI LE, FL 3	AN E #310 #2218 US L #32210 #5 #5 #5 #5 #5		Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	3856 O'REII JACKSONV V JILES, JOH 8451 GULLI JACKSONV	ILLE, FL 32210 (X) Change () Addition NNIE JR. EGE DRIVE ILLE, FL 32208 US
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:)Delete			Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	T FLETCHER 4216 RAMS	:NLEAF ROAD ILLE, FL 32208 US ()Change(X)Addition

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: JAMES F. LOVE II S 04/28/2004