

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000120709

FILED
May 01, 2004
Secretary of State

Entity Name: COKERS' ENTERPRISES INC.

Current Principal Place of Business:

2331 NORTH STATE RD 7
102
LAUDERHILL, FL 33313

New Principal Place of Business:

2331 NORTH STATE RD 7
215
LAUDERHILL, FL 33313

Current Mailing Address:

2331 NORTH STATE RD 7
102
LAUDERHILL, FL 33313

New Mailing Address:

2331 NORTH STATE RD 7
215
LAUDERHILL, FL 33313

FEI Number: 06-1657456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COKER, KALEEL A
11521 NW 29TH MANOR
SUNRISE, FL 33323

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: COKER, KALEEL A
Address: 5335 NW 10TH CT #207
City-St-Zip: PLANTATION, FL 33313

Title: VP () Delete
Name: COKER, ELLOEEN F
Address: 11521 NW 29TH MANOR
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: K.COKER

P

05/01/2004

Electronic Signature of Signing Officer or Director

_____ Date