

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90010 049 ***150.00

DOCUMENT # P02000125458 1. Entity Name JUAN & JUAN ENTERPRISES, INC.																													
Principal Place of Business 728 EL VEDADO ST. 642 BELVEDERE RD WEST PALM BEACH, FL 33405 PB				Mailing Address 728 EL VEDADO ST. WEST PALM BEACH, FL 33405 PB																									
2. Principal Place of Business 642 Belvedere Rd Suite, Apt. #, etc.		3. Mailing Address 642 Belvedere Rd Suite, Apt. #, etc.																											
City & State West Palm Beach FL		City & State West Palm Beach FL		4. FEI Number 13-4237424																									
Zip 33405		Country Palm Beach		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent JUAN, RUBIO 728 EL VEDADO ST. WEST PALM BEACH, FL 33405				7. Name and Address of New Registered Agent Name JUAN I. GONZALEZ Street Address (P.O. Box Number is Not Acceptable) 3684 N.W. 3RD AVENUE City BOCA RATON FL Zip Code 33431																									
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) DATE 4-5-04																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																											
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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 like empowered.																													
SIGNATURE: 4-5-04 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																													