## 2004 FOR PROFIT CORPORATION

## ANNUAL REPORT DOCUMENT # P02000134085 1. Entity Name ERIC DENIRO ENTERTAINMENT INC.

Principal Place of Business 1108 FAIRLAWN DRIVE ROCKLEDGE, FL 32955

Mailing Address

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1108 FAIRLAWN DRIVE ROCKLEDGE, FL 32955

## FILED Mar 31, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03292004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For 51-0440781 Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

321-984-1000

6. Name and Address of Current Registered Agent

DOYLE, MIKE E.A. 1041 PALMER ROAD ROCKLEDGE, FL 32955

## DO NOT WRITE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Reg.stared Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FINNEY, ERIC 1108 FAIRLAWN DRIVE ROCKLEDGE, FL 32955				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DOYLE, MICHAEL 1108 FAIRLAWN DRIVE ROCKLEDGE, FL 32955				·
TITLE NAME STREET ADDRESS CITY - ST - ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE
TRILE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby 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 path; that I am an officer or director of the corporation or the receiver or tastee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my hame appears in Block 10 or Block 11 if changed, or on an attachment with a statutes, with all other like empowered.					