## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000012591

Title:

Name:

Address:

City-St-Zip:

FILED Mar 10, 2004 Secretary of State

Entity Na	me: BPG ENT	ERPRISES INC.						
Current Principal Place of Business:				New Principal Place of Business:				
	. 63RD WAY 2, FL 33023			STE 230	60 AVENUE ES, FL 33015	5		
Current Mailing Address:				New Mailing Address:				
	. 63RD WAY R, FL 33023			STE 230	60 AVENUE ES, FL 33023	3		
FEI Number	: 51-0443353	FEI Number Applied For ( )	FEI Nun	nber Not Appl	icable ( )	Certifica	ate of Status Des	sired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
	63RD WAY	US						
	e named entity s e of Florida.	submits this statement for the p	urpose o	f changing i	ts registered o	ffice or r	egistered age	nt, or both,
SIGNATU	RE:							
Electronic Signature of Registered Agent				Date				
Election Car	mpaign Financing	Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS				
Title: Name: Address: City-St-Zip:	P () KELLY, GRAYL 3404 S.W. 63R MIRAMAR, FL	D WAY		Title: Name: Address: City-St-Zip:	CEO (X KELLY, GRAYI 3404 S.W. 63R MIRAMAR, FL	IN S D WAY	( ) Addition	
Title: Name: Address: City-St-Zip:	V () CALLINGTON, \$ 3404 SW 63RD MIRAMAR, FL	WAY		Title: Name: Address: City-St-Zip:	VP (X CALLINGTON, 3404 SW 63RI MIRAMAR, FL	SHIRLEY WAY	( ) Addition L	
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	P ( ATHOURISE, K 511 NW 96 TE PEMBROKE PI	ELVYN RRACE	(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.

Title:

Name:

Address:

City-St-Zip:

CVP OW, DAISY

1205 NW 155 LANE

MIAMI, FL 33169

SIGNATURE: GRAYLIN KELLY CEO 03/10/2004

( ) Delete

( ) Change (X) Addition