

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

2004

**FILED**  
**Aug 30, 2004 8:00 am**  
**Secretary of State**

08-30-2004 90010 003 \*\*\*150.00

<b>DOCUMENT #</b>	<b>P03000020957</b>
<b>Entity Name</b>	<b>ENOTRIS, INC.</b>

**DO NOT WRITE IN THIS SPACE**

**24082298**

<b>Principal Place of Business</b> 1632 CORNERVIEW LANE		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
<b>City &amp; State</b> ORLANDO, FL		<b>City &amp; State</b>	
<b>Zip</b> 32820	<b>Country</b> ORANGE	<b>Zip</b>	<b>Country</b>
<b>4. FEI Number</b> 51-0448606		<b>Applied For</b> <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	

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IN THIS SPACE**

<b>7. Name and Address of Current Registered Agent</b>	
<b>Name</b>	ENOTRIS BUTLER
<b>Street Address (P.O. Box Number is Not Acceptable)</b>	1632 CORNERVIEW LANE
<b>City</b>	ORLANDO FL
<b>Zip Code</b>	32820

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.

<b>NATURE</b>		<b>8/24/04</b>
<small>Signature, typed or printed name of registered agent and title if applicable.</small>		<small>DATE</small>

(NOTE: Registered Agent signature required when reinstating)

<b>This corporation is not eligible to satisfy its intangible tax filing requirements and elects to do so.</b> <input type="checkbox"/> (See criteria on back)	<b>January 1 - May 1 Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Department of State</b>	<b>10. Election Campaign Financing</b> <input type="checkbox"/> <b>Trust Fund Contribution.</b>	<b>\$5.00 May Be Added to Fees</b>
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**OFFICERS AND DIRECTORS**

<b>OFFICERS AND DIRECTORS</b>	<b>TITLE</b>
<b>PRES. /DIRECTOR</b> ENOTRIS BUTLER 1632 CORNERVIEW LANE ORLANDO, FL 32820	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>
	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>
	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>
	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>
	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>
	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>

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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 11 or on an attachment with an address, with all other like empowered.

**GNATURE:** ENOTRIS BUTLER, PRESIDENT

8/24/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment  
24082298  
P03000020957

AUGUST 24, 2004

ENOTRIS, INC.  
1632 CORNERVIEW LANE  
ORLANDO, FL 32820  
P03 000020957  
51-0448606

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
PO BOX 1500  
TALLAHASSEE, FL 32302-1500

DEAR SIR OR MADAM:

ENCLOSED IS THE 2004 ANNUAL REPORT FOR  
OUR COMPANY AND THE \$150.00 PAYMENT THAT IS DUE.

THE REASON THIS FORM WAS NOT FILED PRIOR TO  
MAY 1st IS THAT WE NEVER RECEIVED THE RENEWAL IN THE MAIL.

A PERSON FROM YOUR OFFICE SAID "IF WE NEVER  
RECEIVED THE RENEWAL YOU WOULD ALLOW THE FORM TO BE  
FILED AT THIS TIME WITHOUT A PENALTY". THANK YOU VERY  
MUCH.

VERY TRULY YOURS,  
ENOTRIS, INC.

  
ENOTRIS BUTLER, PRESIDENT