2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000049119

FILED Feb 27, 2004 8:00 am Secretary of State 02-27-2004 90031 006 ***150.00

LITTLE NIKKI,	INC.								
Principal Place of Business 16128 CARDEN DRIVE ODESSA, FL 33556		Mailing Address 16128 CARDEN DRIVE ODESSA, FL 33556				PIES IIIII BBIII BBIII EBI		 , · · ·	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02092004	Chg-P	CR2E03	4 (10/03)	
City & State		City & State	City & State		4. FEI Number 73-16	72303		⊢	plied For t Applicable
Zip	Country	Zip	Count	try	5. Certificate of	Status Desired		8.75 Add ee Require	litional 1
6. N	lame and Address of Currer	nt Registered Agent	· :=	- Name		ddress of New R		gent	
GARDNER, JOHN W ESQ 128 WEST ROBERTSON STREET				Gardner, John W., Esquire Street Address (P.O. Box Number is Not Acceptable) 221 East Robertson Street					
BRANDON, FL 33511				221 Eas	t Rober	tson St	eet	<u> </u>	
\wedge	d N=			City		• •		Zin Cod	
	MALM.			Brandon			FL	3335	
 The above named early subhits this statement for the purpose of changing its registered offi the obligations of registered about. 					ed agent, or both	in the State of Fig	orida. Tam ta	imiliar with,	and accept
SIGNATURE		:				2/2	3/04	/ 	·,
Signature	typeo s purited Almado en ellered age			d Agent signature required	when reinstating)		DATE .		
FILE NOV After May 1, 2	VIII FEE IS \$150.00 2004 Fee will be \$550	9. Election Camp Trust Fund Co	paign Finan	noing \$5.	.00 May Be ed to Fees	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	a elakur endi territik en eleker		
10.	OFFICERS AN	D DIRECTORS	11.	· 7	ADDITIONS/C	HANGES TO OFF			
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	3 CARDEN DRIVE SSA, FL 33556	••	STREI City-			-	-		
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12. I hereby certify th	at the information supplied w	ith this filing does not qualify	for the exer	mption stated in Se	ection 119.07(3)(i)	Florida Statutes.	I further certi	fy that the in	nformation
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 his 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR									