2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000088575

Entity Name: SALAS ENTERPRISES, INC

FILED Apr 22, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19001 NE 14TH AVE 804 LAMPLIGHTER DR NW APT 103 PALM BAY, FL 32907

NORTH MIAMI BEACH, FL 33179

Current Mailing Address: New Mailing Address:

19001 NE 14TH AVE 804 LAMPLIGHTER DR NW APT 103 PALM BAY, FL 32907

APT 103 PALM BAY, FL 32 NORTH MIAMI BEACH, FL 33179

FEI Number: 20-0147056 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SALAS, RICARDO

19001 NE 14TH AVE

APT 103

SALAS, RICARDO

804 LAMPLIGHTER DR NW
PALM BAY, FL 32907 US

APT 103 PANORTH MIAMI BEACH, FL 33179 US

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.

SIGNATURE: RICARDO SALAS 04/22/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 SALAS, RICARDO
 Name:
 SALAS, RICARDO

 Address:
 19001 NE 14TH AVE APT 103
 Address:
 804 LAMPLIGHTER DR NW

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33179
 City-St-Zip:
 PALM BAY, FL 32907

Title: VP (X) Delete Title: () Change () Addition

 Name:
 SALAS, ESPERANZA C
 Name:

 Address:
 19001 NE 14TH AVE APT 103
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33179
 City-St-Zip:

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.

SIGNATURE: RICARDO SALAS P 04/22/2004