2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136416

GORDON, JIMMIE JR.

1830 S.CLYDE MORRIS BLVD

DAYTONA BEACH, FL 32119

Name:

Address:

City-St-Zip:

v Name: LIRBAN PROMOTIONAL ENTERPRISES IN

FILED May 01, 2004 Secretary of State

Entity Name: URBAN PROMOTIONAL ENTERPRISES, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	. MARTIN LU1 . BEACH, FL	THER KING BLVD 32114			
Current Mailing Address:			New Mailing Address:		
	. MARTIN LU1 . BEACH, FL	THER KING BLVD 32114			
FEI Number:	20-0412284	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
GORDON, JIMMIE SR. 1445 DR. MARTIN LUTHER KING BLVD DAYTONA BEACH, FL 32114 US			144 S DR. MARTIN L	GORDON, JIMMIE SR. 144 S DR. MARTIN LUTHER KING BLVD DAYTONA BEACH, FL 32114 US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE:				05/01/2004	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GORDON, JIM 1830 S.CLYDE) Delete MIE SR. E MORRIS BLVD ACH, FL 32119	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MOON, RONAI 2112 S. PALM		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BELL, SHANTI 1830 S.CLYDE) Delete NA E MORRIS BLVD NCH, FL 32119	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	S () Delete	Title:	() Change () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JIMMIE GORDON SR P 05/01/2004