


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90248 041 ***150.00

DOCUMENT # P03000150088 1. Entity Name UZ ENTERPRISES, INC.					
Principal Place of Business 3901 N.W. 79TH AVE. STE 105 MIAMI, FL 33166			Mailing Address 3901 N.W. 79TH AVE. STE 105 MIAMI, FL 33166		
2. Principal Place of Business 7911 NW 72 AVE Suite, Apt. #, etc. # 105		3. Mailing Address 7911 NW 72 AVE Suite, Apt. #, etc. # 105			
City & State MEDLEY, Florida		City & State MEDLEY, Florida			
Zip 33166		Country U.S.A.		4. FEI Number 20-0717696	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent UZ, JOSE 3901 N.W. 79TH AVE. STE 105 MIAMI, FL 33166			7. Name and Address of New Registered Agent Name: UZ, JOSE Street Address (P.O. Box Number is Not Acceptable): 7911 NW 72 AVE Suite #105 City: MEDLEY FL Zip Code: 33166		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>JOSE UZ</u> <u>PRESIDENT</u> <u>4/27/04</u> <small>Signature, type, or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD UZ, JOSE 3901 N.W. 79TH AVE. STE 105 MIAMI, FL 33166	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>JOSE UZ</u> <u>PRESIDENT</u> <u>4/27/04</u> <u>305-887-1100</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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