

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05-04-04 90170 005 #150.00
07122004 No Chg-P CR2E034 (10/03)

DOCUMENT # P93000022799

1. Entity Name
MAURICE'S ENTERPRISES, INC.



Principal Place of Business
**4601 W HALLANDALE BEACH BLVD
HOLLYWOOD, FL 33023 US**

Mailing Address
**7331 NW 44 COURT
LAUDERHILL, FL 33319 US**

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0401521

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HUDSON, MAURICE
7331 N.W. 44TH COURT
LAUDERHILL, FL 33319**

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when restate) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HUDSON, MAURICE
STREET ADDRESS	7331 N.W. 44TH COURT
CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	VP
NAME	HUDSON, MARYLAND
STREET ADDRESS	7331 N.W. 44TH COURT
CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Maurice Hudson* **8/24/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #