

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P93000026575

1. Entity Name
ACHEE ENTERPRISES, INC.



Principal Place of Business 18174 NORTHWEST 2ND AVENUE MIAMI, FL 33169	Mailing Address 18174 NORTHWEST 2ND AVENUE MIAMI, FL 33169
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11033882

2. Principal Place of Business 1182 N. STATE RD 7 Suite, Apt. #, etc.	3. Mailing Address 1182 N. STATE RD 7 Suite, Apt. #, etc.
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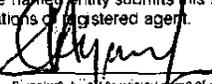


CHECK HERE IF MAKING CHANGES

City & State LAUDERHILL FL	City & State LAUDERHILL FL	4. FEI Number 65-0396438	Applied For Not Applicable
Zip 33313	Country USA	Zip 33313	Country USA

5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent	
AYOUNGCHEE, STEPHEN 18174 NORTHWEST 2ND AVENUE MIAMI, FL 33169	
7. Name and Address of New Registered Agent	
Name IRO AYOUNGCHEE	
Street Address (P.O. Box Number is Not Acceptable) 1182 N. STATE ROAD 7	
City LAUDERHILL FL Zip Code 33313	

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:  DATE: 4/30/03

(NOTE: Registered Agent signature required when reinstating)

<p>FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State</p>	<p>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees</p>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AYOUNGCHEE, STEPHEN 18174 NORTHWEST 2ND AVENUE MIAMI, FL 33169 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> 1182 N. STATE RD 7 LAUDERHILL FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AYOUNGCHEE, IRO 18174 NORTHWEST 2ND AVENUE MIAMI, FL 33169 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> 1182 N. STATE RD 7 LAUDERHILL FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>

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:  IRO AYOUNGCHEE 4/30/03 954-316-0036

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

CFR2E034 (10/02)