


2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Mar 05, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000062992
 1. Entity Name
JULIAN GLOBAL ENTERPRISES, INC.



Principal Place of Business Mailing Address
440 PELICAN BAY DRIVE **440 PELICAN BAY DRIVE**
DAYTONA BEACH, FL 32119 **DAYTONA BEACH, FL 32119**

DO NOT WRITE IN THIS SPACE



03032004 No Chg-P CR2E034 (10/03)

4. FEI Number
58-3202532 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
JULIAN, CARL E
440 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119

DO NOT WRITE 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 reconstituting)
Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$350.00

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

U00000077898
 03/08/04-80006-005 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST JULIAN, CARL E 440 PELICAN BAY DRIVE DAYTONA BEACH, FL 32119
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Carl E Julian* **CARL E JULIAN**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-3-04 386-767-1745
Date Daytime Phone #