

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000073260

1. Entity Name
LITTLE RIVER ENTERPRISES, INC.

FILED
Apr 20, 2000 8:00 am
Secretary of State
04-20-2000 90028 041 ***150.00

Principal Place of Business 1903 S. CONGRESS AVE., SUITE 160 BOYNTON BEACH FL 33426 US	Mailing Address 24 SWEETBRIAR CT ASHEVILLE NC 28803-8604 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3329 N.W. 55TH ST Suite, Apt. #, etc. Bldg 13 City & State FT Lauderdale FL Zip 33309 Country US	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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4. FEI Number 65-0544443	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**MICHAEL, EDWARD JR
1903 S. CONGRESS AVE
SUITE 160
BOYNTON BEACH FL 33426**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
3329 N.W. 55TH ST
Bldg 13
City
FT Lauderdale **FL** Zip Code
33309

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.

SIGNATURE Edward Michael Jr Edward Michael Jr for Term 4/10/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MICHAEL, EDWARD JR. 24 SWEETBRIAR CT ASHEVILLE NC 28803 <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	P POTOCZEK, BARBARA 24 SWEETBRIAR CT ASHEVILLE NC 28803 <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"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward J. Michael Jr Edward Michael Jr for Term 4-10/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # **954-485-0045**

CR2E034 (9/99)