2004 FOR PROFIT CORPORATION ANNUAL REPORT

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Apr 14, 2004 08:00 AM Secretary of State DOCUMENT # P94000073260 LITTLE RIVER ENTERPRISES, INC. Mailing Address Principal Place of Business 24 SWEETBRIAR CT 3329 NW 55TH ST ASHEVILLE, NC 28803 US BLDG 13 FORT LAUDERDALE, FL 33309 No Chg-P CB2E034 (10/03) 01052004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0544443 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MICHAEL, EDWARD JR DO NOT WRITE 3329 NW 55TH ST **BLDG 13** IN THIS SPACE FORT LAUDERDALE, FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be U00000111925 FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 04/14/04-80002-011 150.00 OFFICERS AND DIRECTORS 10. ST TITLE MICHAEL, EDWARD JR. NAME 24 SWEETBRIAR CT STREET ADDRESS CITY-ST-ZIP ASHEVILLE, NC 28803 IIILE NAME POTOCZEK, BARBARA STREET ADDRESS 24 SWEETBRIAR CT CITY-ST-ZIP ASHEVILLE, NC 28803 NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP THE

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12. Thereby 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 cath; 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: Some Distance of Signature and Type Day of Printed NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OR PRINTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME