2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 02, 2008 08:00 AM **Secretary of State** DOCUMENT # P95000027158 ONE THOUSAND ENTERPRISES, INC. Principal Place of Business Mailing Address 2780 NE 7TH AVENUE 2780 NE 7TH AVENUE POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064 01242008 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 65-0621528 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE FERNANDEZ, MANUEL 2780 NE 7TH AVENUE POMPANO BEACH, FL 33064 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registating) U00000877776 04/14/08-80028-003 150.00 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME FERNANDEZ, MANUEL Magazin (m. 17 Januari 1947) (STREET ADDRESS 2780 NE 7TH AVENUE CITY-ST-ZIP POMPANO BEACH, FL 33064 TITLE NAME The state of the control of the state of the STREET ADDRESS CITY-ST-ZIP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZiP رجويرك مرير الخي

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR

FILED

Daytime Phone #