2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000059902

Entity Name: JOHN HOCK ENTERPRISES, INC.

FILED Mar 08, 2004 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------------------------------|-------------------------------------------|--|
| 3350 NW BOCA RATON E SUITE A24 BOCA RATON, FL 33431 | BLVD US | 314 NE 1ST AVENUE DELRAY BEACH, FL 33444 | US | |
| Current Mailing Address: | | New Mailing Address: | New Mailing Address: | |
| 3350 NW BOCA RATON E SUITE A24 BOCA RATON, FL 33431 | | PO BOX 1040 DELRAY BEACH, FL 33447 | US | |
| FEI Number: 65-0599148 | FEI Number Applied For () FEI | Number Not Applicable () Certif | ficate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of New R | Name and Address of New Registered Agent: | |
| HOCK, JOHN R 3350 NW BOCA RATON E SUITE A 24 BOCA RATON, FL 33431 | | HOCK, JOHN R PO BOX 1040 DELRAY BEACH, FL 33447 | US | |
| 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: | | | 03/08/2004 | |
| Electronic Signature of Registered Agent | | | Date | |
| Election Campaign Financing Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO O | FFICERS AND DIRECTORS: | |

Title: Title: () Change () Addition () Delete HOCK, JOHN R Name: Name: 403 OREGON LANE Address: Address:

City-St-Zip: BOCA RATON, FL 33487 City-St-Zip:

Title: VSD () Delete Title: () Change () Addition SMITH, CAROLYN S Name: Name:

Address: 234 NW 8 STREET Address: BOCA RATON, FL 33432 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROLYN S. SMITH **VSD** 03/08/2004