


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000014048 1. Entity Name VAN ETEN ENTERPRISES, INC.	
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Principal Place of Business 150 SE 2ND AVE STE 800 MIAMI, FL 33131 US	Mailing Address 150 SE 2 AVE STE 800 MIAMI, FL 33131 US
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DO NOT WRITE IN THIS SPACE



04292004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0643387	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CHRISTOPHER, WALDERA B 6400 OVERSEAS HIGHWAY MARATHON, FL 33050
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD VAN ETEN, EDWARD A 5720 SOUTHWEST 116TH AVENUE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD VAN ETEN, JOHN EDWARD 5720 SOUTHWEST 116TH AVENUE MIAMI, FL
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05/03/04 08:00:00 150.00

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>John Van Etten</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>4-29-04</u> <small>Date</small>	<u>305 358 3230</u> <small>Daytime Phone #</small>
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