


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000050613		
1. Entity Name RONNIE'S ENTERPRISES INC.		
Principal Place of Business 11548 NW 6TH CT CORAL SPRINGS, FL 33071 US		Mailing Address 11548 NW 6TH CT CORAL SPRINGS, FL 33071 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ARBELI, AHARON 11548 NW 6TH CT CORAL SPRINGS, FL 33071		DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
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
10. OFFICERS AND DIRECTORS		
TITLE	P	
NAME	ARBELI, AHARON	
STREET ADDRESS	11548 NW 6TH CT	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TITLE		
NAME		
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CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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>Aharon Arbeli</u>		4/23/04 (954) 340-0026
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>



04232004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3417462	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

U000000130475
04/26/04-80120-012 150.00

**DO NOT WRITE
IN THIS SPACE**