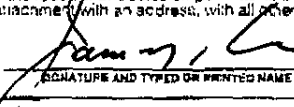


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000051783				
1. Entity Name JAMES & AMADO ENTERPRISES, INC.				
Principal Place of Business 12957 S.W. 134TH STREET MIAMI, FL 33186-5889 US		Mailing Address 12957 S.W. 134TH STREET MIAMI, FL 33186-5859 US		
DO NOT WRITE IN THIS SPACE		04272004 No Chg-P CR2E034 (10/03)		
		4. FEI Number 65-0676283		
		Applied For Not Applicable		
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
5. Name and Address of Current Registered Agent LEON, AMADO J 13462 SW 129TH TER. MIAMI, FL 33186		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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when not indicated) DATE				
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HERNANDEZ, JAMES 13462 SW 129TH TER. MIAMI, FL 33186			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LEON, AMADO J 13462 SW 129TH TER. MIAMI, FL 33186			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE 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 recipient 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 life empowered.				
SIGNATURE: 				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 04/28/04		