2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Jan 30, 2004 08:00 AM DOCUMENT # P96000055583 **Secretary of State** 1. Entity Name TAURANII ENTERPRISES, INC. Principal Place of Business Mailing Address 5120 HAWKHURST AVE FT LAUDERDALE FL 33331 US 5120 HAWKHURST AVE FT LAUDERDALE FL 33331 US 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc CR2E034 (11/03) City & State Applied For City & State 4. FEI Number 65-0674500 Not Applicable \$8.75 Additional Zio Country Ζφ Country 5. Certificate of Status Desired \Box 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RUSHIN, JERRY Street Address (P.O. Box Number is Not Acceptable) 235 N.E. 148TH ST. MIAMI FL 33161 City Zio Code 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 agont and title it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Change Addition D Defete TITLE TITLE | 1000000022851 | 02/02/04-80002-006 150.00 MAME RUSHIN, JERRY NAME STREET ADDRESS STREET ADDRESS 235 N.E. 148TH ST. NORTH MIAMI FL 33161 DITY-ST-7P CITY-ST-ZIP ☐ Change Addition ☐ Delete TIRE BRF RUSHIN, SHELBY NAME NAME STREET ACCRESS STREET ADDRESS 981 NW 203 ST MIAMI FL 33169 CHTY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TIME MARKE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHTY - ST - ZIP Change | Addition ☐ Delete TITLE TITLE NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not quality 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.

JERRY J. Rushia 1/22/04 305 4444404

GOFFICER OR DIRECTOR

Date

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