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Secretary of State

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CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000088934 ✓ OK

1. Corporation Name

ENTERPRISES, INC.

Principal Place of Business

13400 S.W. 62 STREET
 UNIT A-101
 MIAMI - FL 33183

Mailing Address

13400 S.W. 62 STREET
 UNIT A-101
 MIAMI - FL 33183

2. Principal Place of Business

21 Suite, apt. B, etc.

City & State

22 City & State

Zip

23 Zip

Country

24 Country

2a. Mailing Address

25 Suite, apt. B, etc.

City & State

26 City & State

Zip

27 Zip

Country

28 Country

9. Name and Address of Current Registered Agent

DEBORAH, TRAKOVIC

14627 S.W. 112 STREET

MIAMI - FL 33186

81 Name

82 Street Address (P.O. Box Number (if Not Acceptable))

83 City

84 Zip Code

FL 83 Zip Code

11. Pursuant to the provisions of Sections 607.050 and 607.1500, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name, of registered agent and date of appointment

Signature, typed or printed name, of registered agent and date of appointment

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

4-24-99

Deborah Trakovic