2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

Signature typed or protect name of registered agent and disa 4 applicable.  File Now!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.80  Make Check Payable to Florida Department of State  D OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.6  Sirect Address (P.O. Box Number is Not Acceptable)  \$8.75 Additional Fee Required  7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City  FL Zip Code  City  FL Zip Code  City  FL Zip 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 acceptable of the obliquations of registered agent and disa 4 applicable.  NOTE Registered Agent signature required when refinations  9. Election Campaign Financing Trust Fund Contribution.  After May 1, 2004 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.6  ITILE  D Detele  ITILE  U00000035589  I22/U6/04-80059-013 158.75	DOCUMENT # P96000094423					Feb 04, 2004 08:00 AM		
Principal Place of Business  Mailing Address 917 STATE ROAD 84 FORT LAUDERDALE FL 33315  2. Principal Place of Business  Surie, Apt #, etc.  Surie, Apt #, etc.  City & State  4. FEI Number 65-0706027  S. Certificate of Status Desired  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  JACQUES, HERBERT E JR  322 SOUTHWEST 20TH STREET FORT LAUDERDALE FL 33315  City  City  FL  Zip 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. Lam familiar with, and acc debt debt of the collegations of registered agent and that # applicable.  FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  TITLE  JACQUES, HERBERT E JR  Sincer Address (P.O. Box Number is Not Acceptable)  PATE  FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO/OFFICERS AND DIRECTORS IN 10 Florids  INC.  INC.  JACQUES, HERBERT E JR  Sincer Address (P.O. Box Number is Not Acceptable)  PATE  ADDITIONS/CHANGES TO/OFFICERS AND DIRECTORS IN 10 Florids  INC.  JACQUES, HERBERT E JR  SINCER ADDRESS  JACQUES, HERBERT E JR  SINCER ADDRESS  JACQUES, HERBERT E JR  JACQUES, HERBERT E JR	•					Secretary o	of State	
917 STATE ROAD 84 FORT LAUDERDALE FL 33315  2. Principal Place of Business 3. Mailing Address Surie, Apt #, etc. Surie, Apt #, etc. Surie, Apt #, etc. MOORE CR2E034 (11703)  Applied Fc Nor Applie 65-0706027  Zip Country Zip Country S. Certificate of Status Desired G. Name and Address of Current Registered Agent Marne  JACQUES, HERBERT E JR 322 SOUTHWEST 2OTH STREET FORT LAUDERDALE FL 33315  City FL Zip 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 accide the obligations of registered agent.  Signature  FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State  0. OFFICERS AND DIRECTORS  III. III. JACQUES, HERBERT E JR Signature typade or printer dagent and flow 1 applicable.  NOTE Registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accide to Press Address (P.O. Box Number is Not Acceptable)  PL Zip 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 accide the obligations of registered agent.  SIGNATURE  Signature typade or printer diagent and flow 1 applicable.  NOTE Registered Agent signature required were referedated.  9. Election Campaign Financing Trust Fund Contribution  Active Fee Address (P.O. Box Number is Not Acceptable)  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  IIIL  IIIL  IIIL  IMM JACQUES, HERBERT E JR  IIIL  JACQUES, HERBERT E JR  JACQUES, HERBERT E	HEJJ EN	I ERPRISES, INC.	••					
2. Principal Place of Business  3. Mailing Address  Surie, Apt. #, etc.  MOORE  CR2E034 (11/03)  Applied Fc Not Applied Fc Not Applied Fc Not Applied Fc Required  6. Name and Address of Current Registered Agent  Name  JACQUES, HERBERT E JR  322 SOUTHWEST 2OTH STREET FORT LAUDERDALE FL 33315  City  Street Address (P.O. Box Number is Not Acceptable)  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. It am familiar with, and acceptable of the obligations of registered agent.  SIGNATURE  STREET ADDRESS  P. Election Campaign Financing Trust Fund Contribution.  SSON May Addred to Feet JACQUES, HERBERT E JR  SIRET ADDRESS  ONTH STATE  OPER CONTRIBUTIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  ITIE JACQUES, HERBERT E JR  SIRET ADDRESS  OTHY-ST-ZP  OPER LAUDERDALE FL 33315	Principal Plac	ce of Business	Maiking Address					
2. Principal Place of Business 3. Mailing Address Surie, Apt #, etc. MOORE CR2E034 (11/03)  City & State City & State 4. FEI Number 65-0706027 Nor Applied Fig.								
Surie, Apt #, etc.  MOORE CR2E034 (11/03)  Applied Provided Provi	TONT ZAOZ	PERIDACE ( E 30013	, OIL LAUDEIDACE	, E 00010	,	; \$5553553 355 5535 SHIR BURN SUNI BURN		S### 55 5 ### 1
City & State  City & State & Country  City  City  City  FL Zip 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 acceptable of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acceptable of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acceptable of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acceptable of changing its registered agent spinetic required when refusating)  City FL Zip 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 acceptable of Plorida present agent and state agent a	2. Principal Place of Business		3. Mailing Address					
City & State  City & State & Country  City  City  City  FL Zip 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 acceptable of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acceptable of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acceptable of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acceptable of changing its registered agent spinetic required when refusating)  City FL Zip 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 acceptable of Plorida present agent and state agent a	Sueto Ant # atc		State Act # etc				3 <b>363</b> 83 33 3 <b>84</b> 01	
Zip Country Sp. Required Sp. Sp. 75 Additional Fequired Agent To Name and Address of New Registered Agent Name  JACQUES, HERBERT E JR 322 SOUTHWEST 20TH STREET FORT LAUDERDALE FL 33315  City FL Zip 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 acceptable to florida or printed name of registered agent and tile 4 applicable. (NOTE Registered Agent signature required when refressive)  FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$500.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 16 INJURY INJUR								
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  JACQUES, HERBERT E JR 322 SOUTHWEST 20TH STREET FORT LAUDERDALE FL 33315  City  FL Zip 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 acceptable to bligations of registered agent.  SIGNATURE  Signature bysect or perted name of registered agent and dise 4 applicable.  PEL S150.00 After May 1, 2004 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITLE  D ACQUES, HERBERT E JR SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  CITY-ST-ZIP FORT LAUDERDALE FL 33316  CITY-ST-ZIP FORT LAUDERDALE FL 33316  CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33316  CITY-ST-ZIP CITY-ST-ZI	City & State		City & State		4. FEI Number 65-0706027	<b>∠</b> }- }-	piled For t Applicable	
G. Name and Address of Current Registered Agent  JACQUES, HERBERT E JR 322 SOUTHWEST 20TH STREET FORT LAUDERDALE FL 33315  City  FL Zip 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 accident the obligations of registered agent.  SIGNATURE  Signature typed or printed name of registered agent and 6tils 4 applicable. (NOTE Registered Agent agent when refreshing)  DATE  FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 ft  NAME JACQUES, HERBERT E JR STREET ADDRESS  CITY ST. 2P FORT LAUDERDALE FL 33316  Delete  ITILE  Delete  TILE  Delete  TILE  Delete  TILE  Delete  TILE  DELET DELET DELET  STREET ADDRESS  TILE  DELET DELET  TILE	Zip Country		Zip Country		5. Certificate of Status Desired	\$8.75 Add	rtional t	
JACQUES, HERBERT E JR 322 SOUTHWEST 20TH STREET FORT LAUDERDALE FL 33315  City  FL Zip 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 acc the obligations of registered agent.  SIGNATURE  Signature typed or ported name of registered agent and 696 4 applicable.  FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$50.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 16  INVERTIGATION  SIRRET ADDRESS  12. DEGLE  CITY-ST-ZIP FORT LAUDERDALE FL 33315  CITY-ST-ZIP FORT LAUDERDALE FL 33315  Street Address (P.O. Box Number is Not Acceptable)  City ST-Zip  Street Address (P.O. Box Number is Not Acceptable)  FL Zip Code  PL Zip Code  1 Am familiar with, and acceptable of Florida. I am familiar	·	6. Name and Address of Currer	nt Registered Agent			7. Name and Address of New Regis		
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 accidence of registered agent.  SIGNATURE    Signature typed or printed name of registered agent and title 4 applicable. (NOTE Registered Agent signature required when relinstating)    Part	322 SOUTHWEST 20TH STREET					(P.O. Box Number is Not Acceptable)		<u>-</u>
the obligations of registered agent.  SIGNATURE  Signature typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required whon refinishing)  PILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1  TIRLE D OFFICERS AND DIRECTORS  INVESTMENT ADDRESS  STREET ADDRESS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1  Change Add  Added to Fees  Change Add  Change Add  City-St-Zip  FORT LAUDERDALE FL 33315  CITY-ST-Zip  TILE  NAME  STREET ADDRESS					City		FL Zip Code	9
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  TIRLE  D  JACQUES, HERBERT E JR STREET ADDRESS			for the purpose of changing if	ts registere	ed office or registe	ered agent, or both, in the State of Florida	. I am familiar with,	and accept
After May 1, 2004 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  D JACQUES, HERBERT E JR  STREET ADDRESS  322 SOUTHWEST 20TH STREET  TITLE  Delete  IITLE  OFFICERS AND DIRECTORS IN 11  Change Added to Fees  IITLE  UMAKE  UMAKE  UMAKE  US00000038589  CITY-ST-ZIP  FORT LAUDERDALE FL 33315  CITY-ST-ZIP  Delete  IITLE  NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	SIGNATURE	Signature Typed or printed name of registered ago	ont and title if applicable. (NC	TTE Registered	saupen svulsange inagA t	ed when rainstating)	DATE	<del></del>
After May 1, 2004 Fee will be \$50.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  TITLE  D  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 C.  Change	 F	FILE NOW!!! FEE IS \$150.00				6. Floation Compaign Finance	ina #F.A	
10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TO THE CONTROL OF THE CONTROL		•	,					
NAME STREET ADDRESS 322 SOUTHWEST 20TH STREET BR STREET ADDRESS 322 SOUTHWEST 20TH STREET COTTY-ST-ZIP FORT LAUDERDALE FL 33315 CITY-ST-ZIP Delete IRLE CHAME NAME STREET ADDRESS						ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS	SINTE
STREET ADDRESS 322 SOUTHWEST 20TH STREET		} <sup>=</sup>	☐ Delete		ŧ	110000003E5\$		Addition Addition
NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	STREET ADDRESS	322 SOUTHWEST 20TH STREET	r 	188	ET ADDRESS	02/06/04-80059	9-019 158.79	5
STREET ADDRESS STREET ADDRESS			☐ Delete		3		☐ Change	Addition
CITY-ST-ZEP CITY-ST-ZEP								
							·· · · · · · · · · · · · · · · · · · ·	
TITLE			☐ Detete		}		∐ Change	Addition
STREET ADDRESS STREET ADDRESS				3	}			
CRY-ST-ZIP			∏ ∩alata				Channe	_ · · · · · · · · · · · · · · · · · · ·
NAME NAME			_ bone		}			
STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP					į			
			☐ Delete		<del></del>		☐ Change	☐ Addition
NAME NAME CTRUT ADDRESS				•	1			
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP				1	{			
			☐ Delete				☐ Change	Addilion
NAME STREET ADDRESS STREET ADDRESS								
CITY-ST-ZIP	City-St-Zip			CITY	-S7-2)P	<u> </u>		
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 faccurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or direct of the corporation or the receiver or trustee empowered of execute this export as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block changed, or on an attachment with an address, with the liber provered.	12. I hereby indicated of the co	certify that the Information supplied with a report or supplemental report or supplemental report or poration or the receiver or trustee en	with this filing does not qualify to the true and deccurate and that appropriate the report of the state of t	for the execution of the street of the stree	mption stated in S ture shall have the red by Chapter 60	Section 119.07(3)(i), Florida Statutes. I fund a same legal effect as if made under oath 07, Florida Statutes; and that my name ap	her certify that the in that I am an officer pears in Block 10 or	nformation or director Block 11 if

HENGERT & SACOURY JR 1/28/04

FILED