


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 23, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P97000016195</b>	
1. Entity Name <b>NIPPERS CAFE INC.</b>	

Principal Place of Business <b>12106 SW 117 CT. MIAMI, FL 33186</b>	Mailing Address <b>12106 SW 117 CT. MIAMI, FL 33186</b>
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**DO NOT WRITE IN THIS SPACE**



02172004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0731463</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

**NAPIER, HENRY  
12106 SW 117 CT.  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>U000000062145 02/23/04-80110-005 150.00</b>
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**10. OFFICERS AND DIRECTORS**

TITLE <b>D</b>	NAME <b>NAPIER, HENRY</b>
STREET ADDRESS <b>12106 SW 117 CT.</b>	
CITY-ST-ZIP <b>MIAMI, FL 33186</b>	
TITLE <b>VPD</b>	NAME <b>NAPIER, MARIE</b>
STREET ADDRESS <b>12106 SW 117 CT</b>	
CITY-ST-ZIP <b>MIAMI, FL 33186</b>	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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:** Henry W. Napier **HENRY W NAPIER** Pres 2/18/04 305-232-3035

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #