2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 14, 2004 08:00 AM Secretary of State **DOCUMENT # P98000036087** SEAN LILLY ENTERPRISES, INC. Principal Place of Business Mailing Address 890 SW 69TH AVE 890 SW 69TH AVE MIAMI, FL 33144 MIAMI, FL 33144 01062004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0827668 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent LILLY, SEAN DO NOT WRITE 890 SW 69TH AVE MIAMI, FL 33144 IN THIS SPACE e purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits 1 the obligations of registered agent. SIGNATURE. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, Added to Fees After May 1, 2004 Fee will be \$550.00 -008 300.00 10. OFFICERS AND DIRECTORS PCD TITLE LILLY, SEAN L NAME STREET ADDRESS 890 SW 69TH AVE CITY-ST-ZIP MIAMI, FL 33144 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP s not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information trafe and that my signature shall have the same legal effect as if made under oath; that I am an officer or director oute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with this indicated on this report or supplemental report is the of the corporation or the receiver or truther empower filing does and accur empowered. SIGNATURE:

HIRE AND TO PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #