

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000045452

FILED
Mar 17, 2004
Secretary of State

Entity Name: LA FE ENTERPRISES, INC.

Current Principal Place of Business:

1452 OSCEOLA PARKWAY
SUITE O
KISSIMMEE, FL 34743

New Principal Place of Business:

Current Mailing Address:

1452 OSCEOLA PARKWAY
KISSIMMEE, FL 34743

New Mailing Address:

FEI Number: 59-3512562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPARKS, JEFFREY C
545 DELANEY AVE
BUILDING 8
ORLANDO, FL 32801

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PENA, FEDERICO
Address: 1452 OSCEOLA PARKWAY
City-St-Zip: KISSIMMEE, FL 34743

Title: D () Delete
Name: PENA, LEONIDA
Address: 1452 OSCEOLA PARKWAY
City-St-Zip: KISSIMMEE, FL 34743

Title: T () Delete
Name: PENA, JENNIFER A
Address: 1452 OSCEOLA PARKWAY
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEONIDA PENA

OFFI

03/17/2004

Electronic Signature of Signing Officer or Director

Date