2004 FOR PROFIT CORPORATION

May 14, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P99000017995 1. Entity Name FLORAVI ENTERPRISES, INC. Principal Place of Business Mailing Address 761 NW 37TH STREET 761 NW 37TH STREET FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309 04272004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0899267 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Ageni GONZALEZ, FLOR DO NOT WRITE 761 NW 37TH STREET FORT LAUDERDALE, FL 33309 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) U00000160493 05/14/04-80006-012 150.00 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE GONZALEZ, FLOR NAME STREET ADDRESS 761 NW 3TH STREET FORT LAUDERDALE, FL 33309 CITY-57-73P NAME STREET ADDRESS CATY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE RILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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 exposwered 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 light empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED