2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000043887

Entity Name: KNICK KNACK ENTERPRISES, INC.

FILED Apr 29, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

812 CAREN AVENUE 812 CAREW AVENUE ORLANDO, FL 32804 812 CAREW AVENUE ORLANDO, FL 32804

Current Mailing Address: New Mailing Address:

812 CAREN AVENUE 812 CAREW AVENUE ORLANDO, FL 32804 812 CAREW AVENUE ORLANDO, FL 32804

FEI Number: 59-3575035 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MERRITT, LINDA K
812 CAREN AVENUE
ORLANDO, FL 32804 US

MERRITT, LINDA K
812 CAREW AVENUE
ORLANDO, FL 32804 US

ORLANDO, FL 32804 US

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: LINDA MERRITT 04/29/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: P (X) Change () Addition Name: MERRITT, LINDA K Name: MERRITT, LINDA K

 Name:
 MERRITT, LINDA K
 Name:
 MERRITT, LINDA K

 Address:
 5620 PADGETT CIRCLE
 Address:
 812 CAREW AVENUE

 City-St-Zip:
 ORLANDO, FL 32839
 City-St-Zip:
 ORLANDO, FL 32804

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 MERRITT, DIANA C
 Name:
 MERRITT, DIANNA C

 Address:
 5620 PADGETT CIRCLE
 Address:
 5620 PADGETT CIRCLE

 City-St-Zip:
 ORLANDO, FL 32839
 City-St-Zip:
 ORLANDO, FL 32839

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 BAKER, KAREN M
 Name:
 BAKER, KAREN D

 Address:
 5620 PADGETT CIRCLE
 Address:
 2500 FORREST CLUB DRIVE

City-St-Zip: ORLANDO, FL 32839 City-St-Zip: ORLANDO, FL 32804

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: LINDA MERRITT PRES 04/29/2004