2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000057320

1. Entity Name

JAMÉS NICHOLAS ENTERPRISES, INC.



Principal Place of Business

113 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004 Mailing Address

113 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004

FILED May 03, 2004 8:00 am Secretary of State

05-03-2004 90462 025 ***150.00

14017323

Daytime Phone #



		 	
04262004	No Chg-P	CR2E034 (10/03)	

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0936466 Applied For
Not Applied For
Not Applied For
Status Desired
Status Desired
Fee Required

6. Name and Address of Current Registered Agent

ADAMS, GERALD J 113 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004

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						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST NICHOLAS, JAMES C 12613 N.W. 15TH STREET SUNRISE, FL 33323					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NICHOLAS, JAMES C 12613 N.W. 15TH STREET SUNRISE, FL 33323			•		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, GERALD 113 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004		DO NOT WRITE			
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY - ST - ZIP	0					
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.						

AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR