2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: X

Jun 28, $\overline{2004}$ 8:00 am **Secretary of State DOCUMENT # P99000078098** 06-28-2004 90011 029 ***150.00 BUSINESS ENTERPRISE PARTNERS, INC. Mailing Address Principal Place of Business A) DECURE PMB 111 73 NURMI DRIVE 2400 E. LAS OLAS FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 06212004 Chg-P Applied For City & State 4. FEI Number City & State 65-0959310 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CHOPEK, JOSEPH B Street Address (P.O. Box Number is Not Acceptable) 73 NURMI DRIVE FORT LAUDERDALE, FL 33301 2400 E. LAS OLAS BLVD. PMB 111 Zip Code 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. JOSEPH B. CHOPER, DILECTOR SIGNATURE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the FILE NOWILL FEE IS \$150.00 П Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition ☐ Change TITLE □ Delete TITLE CHOPEK, JOSEPH B NAME NAME STREET ADDRESS PMB 11, 2400 E. LAS OLAS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33301 CITY- CT. 7IP Change ■ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P~ CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Channe TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 eceiver or flustee 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. JOSEPH B. CHOPEX 6/21/04

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BUSINESS ENTERPRISE PARTNERS, INC. 2400 E. LAS OLAS BLVD., PMB 111 FORT LAUDERDALE, FLORIDA 33301

June 21, 2004

Division of Corporations P. O. Box 1500 Tallahassee, FL 32302-1500

Subject: 2004 Florida For Profit Corporation Annual Report for Business Enterprise Partners, Inc. P99000078098

Dear Sir or Madam:

Enclosed please find the 2004 Annual Report for Business Enterprise Partners, Inc. and our check for \$150.00.

We did not receive a notice in the mail of the requirement to file an annual report. Accordingly, we are paying the \$150 fee without any penalties.

Very truly yours,

Joseph B. Chopek

Director

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