2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2004 08:00 AM Secretary of State DOCUMENT # P99000081543 EXPLORER ENTERPRISES, INC. Mailing Address Principal Place of Business 144 NE 1ST AVENUE 144 NE 1ST AVENUE HALLANDALE, FL 33009 HALLANDALE, FL 33009 CR2E034 (10/03) 04222004 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0948034 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE SHOSHAN, MARC 144 N.E. 1ST AVENUE HALLANDALE, FL 33009 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund_Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME SHOSHAN, MARC STREET ADDRESS 144 N.E. 1ST AVENUE HALLANDALE, FL 33009 COY-ST-ZIP U00000131045 U4/26/04-80138-019 150.00 TITLE NAME STREET ADDRESS CATY-ST-ZP TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZP TITLE MAME STREET ADDRESS CITY-ST-ZIP

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 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.

SIGNATURE:

QUATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2004 954.456.877

FILED