## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 05, 2004 08:00 AM Secretary of State

ANNUAL REPURI					Secretary of State					
DOCUMENT # S09001  1. Entity Name SUPREME FOLIAGE, INC.					Secretary of State					
Principal Place of 8	Business	Mailing Address	· ·							
20400 SW 172 AVENUE		13451 SW 92ND ST								
MIAMI, FL 33187 US MIAMI, FL 33186 US			IS		 	IIFO INITE MONICOLUTO INCE	BIBIT FOR BUT I			
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt #, etc.			04172004	Chg-P	CR2E034	(10/03)		
City & State		City & State			4. FEI Number 62-0235	686		Not	olied For Applicable	
Zip	Country	Zip	Country		5. Certificate of		Fe-	3.75 Addi e Required		
	. Name and Address of Current	Registered Agent	Name		7. Name and A	ddress of New Re	egistered Age	ent		
LUE, DONALE	O G.						<del></del>			
13451 SW 92ND ST MIAMI, FL 33186			Street	Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	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										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating).  DATE										
- Signer	stare, types or printed mane or registered agent	and the processe (NOTE	e. negistaren Agent sig	nature required	wher reinstating)	: • • -	UA IE			
	OW!!! FEE IS \$150.00 1, 2004 Fee will be \$550.	9. Election Campai Trust Fund Cont		<b>\$5.</b> □ Add	.00 May Be ed to Fees					
10,	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OUT	ICEBS AND D	IRECTORS	IN 11	
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í	AMI, FL 33186		CHY-ST-ZIP	<u> </u>						
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NAME LU	JE, DONOVAN G	— <del>-</del>	NAME					-		
l l	451 SW 92ND STREET		STREET ADDRES	s l						
	AMI, FL 33186		CITY-ST-ZIP	<u> </u>		<u></u>				
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L	fu that the information avantice Activ	a this filing does not muchfully	<b>→1</b>	atatad in Ca	oction 110 07/07/0	Florida Statutos	further cores	that the !-	formation	
indicated on to	ly that the information supplied with this report or supplemental report of ation or the receiver or trusted in port on an attachment with an addyress.	s true and accurate and that recovered to execute this report with all other like empowered	my signature sha as required by 0	Il have the Chapter 607	same legal effect 7, Florida Statules	as if made under of and that my name	oath, that I am e appears in E	an officer Block 10 or	or director Block 11 if	