


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 23, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # F10640**  
 1. Entity Name  
 OPERA CORPORATION



Principal Place of Business: 2140 W FLAGLER STREET SUITE 109 MIAMI, FL 33135-1662 US  
 Mailing Address: ENRIQUE LORENZO CPA 13032 SW 5TH STREET MIAMI, FL 33184-1216 US

**DO NOT WRITE IN THIS SPACE**



01272005 No Chg-P CR2E034 (10/03)

4. FEI Number: 59-2068336 Applied For: Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 BENIGNO, NIETO S.  
 11867 SW 93RD TERR  
 MIAMI, FL 33185

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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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00**  
 9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD NIETO, BENIGNO S 11867 SW 93RD TERR MIAMI, FL 331862170
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T NIETO, CARIDAD N DE 11867 SW 93RD TERR MIAMI, FL 331862170
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V NIETO, SERGIO 11867 SW 93RD TERR MIAMI, FL 331862170
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V NIETO, NEISY 11867 SW 93RD TERR MIAMI, FL 331862170
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 02/23/05-80009-003 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: X (Signature) **BENIGNO S. NIETO** Date: 2-17-05 Daytime Phone #: 305 541-2715