2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2004 8:00 am Secretary of State

Miami, FL Zip Zip 33155 Country 33155 S. Name and Address of Current Registered Agent S. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is	
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33155 US 5. Certificate of Status Desired V Fee Requir 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name 30MEZ, BARBARA M Street Address (P.O. Box Number is Not Acceptable) City FL Zip Co 1. 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 the obligations of registered agent. SIGNATURE Synature, speed a pender name of impagered speet and pile of applicables. (NOTE Registered Agent agent) of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent. SIGNATURE Synature, speed a pender name of impagered speet and pile of applicables. (NOTE Registered Agent) or pender name of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent. SIGNATURE Synature, speed a pender agent and pile of applicables. (NOTE Registered Agent agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Registered Agent) or pender agent and pile of applicables. (NOTE Register	Not Applicable
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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)(i), Florida Statutes. I further certify that the 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 office	ge 🔲 Addition
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 changed, or on an attachment with an address, with all other like empowered.	ne information
SIGNATURE: * Daufacal/ Jones BARDARA M. COMEZ 4/6/04 (305) 26	ne information