

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003544

FILED
Apr 28, 2004
Secretary of State

Entity Name: TAMACA CORP.

Current Principal Place of Business:

P.O. BOX 11544
CAPARRA HEIGHTS STATION
SAN JUAN, PR 00922

New Principal Place of Business:

P.O. BOX 11544
SAN JUAN, PR 00922-154

Current Mailing Address:

P.O. BOX 11544
CAPARRA HEIGHTS STATION
SAN JUAN, PR 00922

New Mailing Address:

P.O. BOX 11544
SAN JUAN, PR 00922

FEI Number: 66-0504187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MONTALVO, MARIO J
SANTA MARIA
1643 BRICKELL AVE., APT. 3904
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MONTALVO, MARIO J
Address: CALLE 3 #11, GARDEN HILLS ESTATES
City-St-Zip: GUAYNABO, PR 00966

Title: VP () Delete
Name: MONTALVO, MARIO G
Address: CALLE REY LUIS #432, LA VILLA DE TORRIMAR
City-St-Zip: GUAYNABO, PR 00969

Title: SAT () Delete
Name: MONTALVO, TANIA R
Address: CALLE 3 #11, GARDEN HILLS ESTATES
City-St-Zip: GUAYNABO, PR 00966

Title: VPM () Delete
Name: MONTALVO, CARLOS
Address: CALLE CAOBA #30, ESTANCIAS DE TORRIMAR
City-St-Zip: GUAYNABO, PR 00969

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPM (X) Change () Addition
Name: MONTALVO, CARLOS
Address: 154 CALLE VIOLETA, URB SAN FRANCISCO
City-St-Zip: SAN JUAN, PR 00927

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIO G. MONTALVO

VP

04/28/2004

Electronic Signature of Signing Officer or Director

_____ Date