

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003544

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: TAMACA CORP.

## Current Principal Place of Business:

P.O. BOX 11544  
SAN JUAN, PR 00922

## New Principal Place of Business:

P.O. BOX 11544  
SAN JUAN, PR 009221544

## Current Mailing Address:

P.O. BOX 11544  
SAN JUAN, PR 00922

## New Mailing Address:

P.O. BOX 11544  
SAN JUAN, PR 009221544

FEI Number: 66-0504187

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## 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: 154 CALLE VIOLETA, URB SAN FRANCISCO  
City-St-Zip: SAN JUAN, PR 00927

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

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

04/29/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date