2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 21, 2005 8:00 am Secretary of State DOCUMENT # K50024 04-21-2005 90245 036 ***158.75 1. Entity Name MANORA INVESTMENT CORPORATION Principal Place of Business Mailing Address 40064212 1305 SW 30TH AVE 1305 SW 30 A VE MIAMI, FL 33145 MIAMI, FL 33145 US 2. Principal Place of Business 3. Mailing Address <u>c/o Ivan A. Gomez, Esq.</u> Suite, Apt. #, etc. CR2E034 (10/03) 03292005 Chg-P 601 Brickell Key Drive #507 Applied For City & State City & State 4. FEI Number Miami, Florida 65-0098145 Not Applicable Zip Country Ζip Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required U.S.A. 33131 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent IAG CORPORATE SERVICES, INC. CONSULTING SERVICES OF SOUTH FLORIDA, INC. Street Address (P.O. Box Number is Not Acceptable) 601 Brickell Key Drive 2588 SW 27 AVE MIAMI, FL 33133 Suite 507 City Miami 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. IAG CORPORATE SERVICES, INC By: Ivan A. Gomez, President SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required *9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE PN TITLE ☐ Change ☐ Addition ☐ Delete CIMADEVILLA, MANUEL NAME NAME 1305 S.W. 30TH AVE. STREET ADORESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI, FL STD ☐ Delete ☐ Change ☐ Addition TITLE TITLE CIMADEVILLA, DIGNORA NAME NAME 1305 S.W. 30TH AVE. STREET ADDRESS STREET ADDRESS MIAMI, FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CSTY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-2IP 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 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 manual Cimal Statutes. SIGNATURE: Manuel Cimadevilla, President

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