


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000010253 1. Entity Name SENZA TEMPO OF FLORIDA, INC.	
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Principal Place of Business 6039 COLLINS AVENUE UNIT 1537 MIAMI BEACH, FL 33140-2255	Mailing Address 6039 COLLINS AVENUE UNIT 1537 MIAMI BEACH, FL 33140-2255
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DO NOT WRITE IN THIS SPACE

07012005	No Chg-P	CR2E034 (10/03)
4. FEI Number 59-3650763	Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MORGAN, RICHARD A 2699 SOUTH BAYSHORE DRIVE 7TH FLOOR MIAMI, FL 33133
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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 _____
Signature, typed or printed name of registered agent and title if applicable.

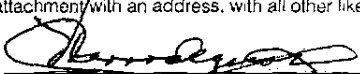
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARRODEGUAS, VICENTE 6039 COLLINS AVE. #1537 MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARRODEGUAS, MARTA 6039 COLLINS AVE. #1537 MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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07/12/05-80006-005 558.75

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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 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:  Vicenta Carrodeguas Date: 7/5/05 Daytime Phone #: (305) 323-2342

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR