

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000022579

FILED  
Mar 31, 2005  
Secretary of State

Entity Name: S T A INC.

**Current Principal Place of Business:**

2600 DOUGLAS RD  
STE 905  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

347 WASHINGTON AVE  
MIAMI BCH, FL 33139 US

**New Mailing Address:**

347 WASHINGTON AVE  
MIAMI BEACH, FL 33139 US

FEI Number: 65-0997346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WANDA PISTELLA, P.A.  
7385 SW 87 AVENUE  
SUITE 100  
MIAMI, FL 33173 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: DPS ( ) Delete  
Name: CANALE, FERNANDO  
Address: 347 WASHINGTON AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD ( ) Delete  
Name: ROBERTS, ROBERTO A F  
Address: 2600 DOUGLAS RD, UNIT 905  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: FERNANDO CANALE

DPS

03/31/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date