

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000082251

Entity Name: COMPUWIZARDS,INC

FILED
Sep 10, 2004
Secretary of State

Current Principal Place of Business:

13635 SW 73 TE
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

13635 SW 73 TE
MIAMI, FL 33183

New Mailing Address:

FEI Number: 11-3652557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBLES, FERNANDO
13635 SW 73 TE
MIAMI, FL 33183

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: ROBLES, FERNANDO
Address: 13635 SW 73 TE
City-St-Zip: MIAMI, FL 33183

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LUKAESKO, BERTHA
Address: 13635 SW 73 TE
City-St-Zip: MIAMI, FL 33183

Title: VP () Change (X) Addition
Name: ROBLES, FERNANDO
Address: 13635 SW 73 TE
City-St-Zip: MIAMI, FL 33183

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 ROBLES

VP

09/10/2004

Electronic Signature of Signing Officer or Director

Date