

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000083600

FILED
Apr 25, 2005
Secretary of State

Entity Name: CIMA PROPERTIES CORPORATION

Current Principal Place of Business:

1200 HIBISCUS AVE PH 2
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

1200 HIBISCUS AVE PH 2
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 76-0735951 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DE VARONA, RAUL J
1320 SOUTH DIXIE HWY STE 280
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA
2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134 US

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: ANTONIO GARCIA

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PORTO, LUIS F
Address: 1200 HIBISCUS AVE PH 2
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: URIBE, SANTIAGO
Address: 1200 HIBISCUS AVE PH 2
City-St-Zip: POMPANO BEACH, FL 33062

Title: VT (X) Delete
Name: VIVES, MAURICO
Address: 2588 SW 27TH AVENUE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: PASTRANA, BEATRIZ
Address: 1401 SOUTH OCEAN BLVD. APT. 507
City-St-Zip: BOCA RATON, FL 33432

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: BEATRIZ PASTRANA

DT

04/25/2005

Electronic Signature of Signing Officer or Director

Date