

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000129684

FILED
Mar 04, 2004
Secretary of State

Entity Name: FLORIDA EXCLUSIVE MAGAZINE CO.

Current Principal Place of Business:

3901 SW 112 AVE
31
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

3901 SW 112 AVE
31
MIAMI, FL 33165

New Mailing Address:

8909 NW 189 TERRACE
MIAMI, FL 33018

FEI Number: 56-2319452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, NELSON
2980 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

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: SP () Delete
Name: SANCHEZ, NELSON
Address: 2980 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: DS () Delete
Name: GONZALEZ, ERNESTO
Address: 2980 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: DT () Delete
Name: BOULTON, PATRICK
Address: 2980 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Delete
Name: RINCON, SANDRA
Address: 4854 NW 7 ST APT 402
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SANCHEZ, NELSON
Address: 2980 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: DS (X) Change () Addition
Name: JOSE, RUANO A
Address: 8909 NW 189 TERRACE
City-St-Zip: MIAMI, FL 33018 US

Title: D (X) Change () Addition
Name: RINCON, SANDRA
Address: 4854 NW 7 ST APT 402
City-St-Zip: MIAMI, FL 33126

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: JOSE A. RUANO

DS

03/04/2004

Electronic Signature of Signing Officer or Director

Date