## 2005 FOR PROFIT CORPORATION \_\_ANNUAL REPORT

## FILED Feb 02, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # P03000008612 EDIA, INC.	<b>)</b>			Secretary of Stat
Principal Place 14601 SW 53 MIAMI, FL 33	2ND STREET 14	ing Address 601 SW 52ND STREET AMI, FL 33175	# * * 		
D	O NOT WRITE IN	I THIS SPA	CE	01312005 No Chg-1 4. FEI Number 59-3765180 5. Certificate of Status Desi	Applied For Not Applicable
G. Name and Address of Current Registered Agent  GIAQUINTO, GRASIANO 14601 SW 52ND STREET  MIAMI, FL 33175				DO NOT WRITE IN THIS SPACE	
the obligati	named entity submits this statement for the pulsons of registered agent.  Signature, typed or primits name of registered agent and this if  E NOW!!! FEE IS \$150.00  ay 1, 2005 Fee will be \$550.00	3,	d Agent signature required	d when reinslating)	of Florida. Tam familiar with, and accept
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND DIRECT D GIAQUINTO, GRASIANO 14601 SW 52ND STREET MIAMI, FL 33175 DVP GONZALEZ, RAIZA 14601 SW 52 ST. MIAMI, FL 33175	TORS .			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			diameter (Albania)	DO NOT IN THIS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	***		<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with his fill on this report of supplemental report if true at poration or the receiver or trustee empowered or on an attachment with an address, with all	ng dees not qualify for the exe d accurate and that my signa to execute this report as requi other like empowered.	mption stated in Se ture shall have the red by Chapter 607		utes. I further certify that the information nder cath; that I am an officer or director name appears in Block 10 or Block 11 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR