

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153520

FILED
May 01, 2005
Secretary of State

Entity Name: MURANOPORTOFINO INVESTMENTS, INC.

Current Principal Place of Business:

801 BRICKELL BAY DR, BOX 16
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

C/O PAULO MIRANDA
ONE SE 3RD AVENUE, 28TH FLOOR
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 73-1695641 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AMERICAN INFORMATION SERVICES, INC.
ONE SE 3RD AVE, 28TH FLOOR
MIAMI, FL 33131 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

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: DP () Delete
Name: CURE, CARLOS
Address: 801 BRICKELL BAY DR., BOX 16
City-St-Zip: MIAMI, FL 33131 US

Title: DS () Delete
Name: SOARES, ARTHUR
Address: 801 BRICKELL BAY DR., BOX 16
City-St-Zip: MIAMI, FL 33131 US

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: CARLOS CURE

P

05/01/2005

Electronic Signature of Signing Officer or Director

_____ Date