

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046040

**FILED**  
**May 18, 2005**  
**Secretary of State**

**Entity Name:** CORPORACION INTERNACIONAL DE JOYAS VM, INC.

**Current Principal Place of Business:**

2050 SW QUARRY ST  
PT ST LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

2050 SW QUARRY ST  
PT ST LUCIE, FL 34953

**New Mailing Address:**

FEI Number: 51-0504753

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VALBUENA, FERNANDO  
2050 SW QUARRY ST  
PT ST LUCIE, FL 34953 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P ( ) Change (X) Addition  
Name: VALBUENA, FERNANDO  
Address: 2050 SW QUARRY ST  
City-St-Zip: PORT ST LUCIE, FL .4953

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 VALBUENA

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05/18/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date