


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 23, 2004 8:00 am
Secretary of State

06-23-2004 90001 048 ***550.00

DOCUMENT # P92000004523

1. Entity Name
CORPAC STEEL PRODUCTS CORP.



Principal Place of Business Mailing Address

20801 BISCAYNE BLVD 20801 BISCAYNE BLVD
 SUITE 302 SUITE 302
 AVENTURA FL 33180 AVENTURA FL 33180
 US US

54058453



MOORE CR2E034 (4/04)

2. Principal Place of Business 3. Mailing Address

20803 BISCAYNE BLVD **20803 BISCAYNE BLVD**

Suite, Apt. #, etc. Suite, Apt. #, etc.

SUITE 204 **SUITE 204**

City & State City & State

AVENTURA, FL **AVENTURA, FL**

4. FEI Number Applied For

65-0369689 Not Applicable

Zip Country Zip Country

33180 **USA** **33180** **USA**

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RONES, VICTOR K
16105 NE 18TH AVE
N MIAMI BEACH FL 33162

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
DUE BY September 8, 2004
Make Check Payable to Florida Department of State

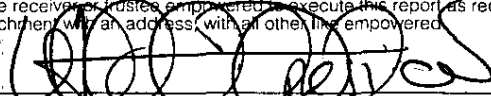
S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00.

9. Election Campaign Financing **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOLDENBERG, JORGE	NAME	WOLDENBERG, JORGE
STREET ADDRESS	20801 BISCAYNE BLVD #302	STREET ADDRESS	20803 BISCAYNE BLVD #204
CITY-ST-ZIP	AVENTURA FL 33180	CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	VP <input type="checkbox"/> Delete	TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOLDENBERGER, IDEL	NAME	WOLDENBERG, IDEL
STREET ADDRESS	20801 BISCAYNE BLVD #302	STREET ADDRESS	20803 BISCAYNE BLVD #204
CITY-ST-ZIP	MIAMI FL 33180	CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	VP <input type="checkbox"/> Delete	TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOLDENBERG, F. TAMMARA	NAME	WOLDENBERG, F. TAMMARA
STREET ADDRESS	20801 BISCAYNE BLVD., #302	STREET ADDRESS	20803 BISCAYNE BLVD #204
CITY-ST-ZIP	MIAMI FL 33180	CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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CITY-ST-ZIP		CITY-ST-ZIP	

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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with an other line empowered.

SIGNATURE: 

5/27/2004 (305) 933-8599