


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED  
Mar 18, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # P94000062079**  
1. Entity Name  
**ENVIJA, INC.**



Principal Place of Business  
**14020 SW 36TH ST.  
MIAMI, FL 33175**

Mailing Address  
**10920 SW 115 ST  
MIAMI, FL 33176 US**

**DO NOT WRITE IN THIS SPACE**



03142005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**65-0516268**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**HERRAN, VIVIAN  
10920 SW 115 ST  
MIAMI, FL 33176**

**DO NOT WRITE  
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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

**U00000268681  
03/18/05-80051-010 150.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HERRAN, EZEQUIEL 14020 SW 36TH ST. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS HERRAN, NANCY 14020 SW 36TH ST. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HERRAN, VIVIAN 14020 SW 36TH ST. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HERRAN, JAVIER 14020 SW 36TH ST. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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 all other files empowered.

**SIGNATURE:** *Vivian Herran* **3/15/05** **3059718179**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #