## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 09, 2005 08:00 AM Secretary of State

705-637-5561

Daytime Phone #

3-8-05 Date

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DOCUI 1. Entity Nam LAND-ST		84			Sec	retary (	of State
Principal Plac	e of Business	Mailing Address		1			
	102 AVENUE	3355 NW 41 ST	•				
MIAMI, FL 3	3016	MIAMI, FL 33142					
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-	~		03072005	No Chg-P	CR2E034 (16	0/03)	
L	O NOT WRITE	CE	4. FEI Numb			Applied For	
				65-052	25776		Not Applicable
1				5. Certificate	of Status Desired	□ \$8.7 Fee R	5 Additional equired
	5. Name and Address of Current Re	gistered Agent		<del></del>			
26.							
MIJARES, BERNARDO			DO NOT WRITE				
2911 S.W. 103 AVE MIAMI, FL 33165							
1017 WH, 1 2 00 100			)	IN	THIS SP	ACE	
			1				
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 agents that the state of th							
SIGNATURE Signature, typed or project name of regisfered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)  DATE							
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees							
10.	OFFICERS AND D	RECTORS	1	-, <del>-, -, -, -,</del>		,	
TITLE	PD		122 2		v =		
NAME	MIJARES, BERNARDO		L				
STREET ADDRESS CITY-ST-ZIP	2911 S.W. 103 AVE MIAMI, FL 33165		1				
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NAME							
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CITY-ST-ZIP	<u> </u>		<u></u>				
12. I hereby	certify that the information supplied with it on this report or supplemental report is tr	is fiting does not qualify for the ex-	emption stated in Se	ection 119.07(3)	(i), Florida Statutes. I	further certify tha	at the information
of the cor	tion this report of supplemental report is troporation or the receiver or trustee empower, or on an attachment with an address, with	ered to execute this report as requ	lired by Chapter 60	7, Florida Statut	es; and that my name	e appears in Bloc	k 10 or Block 11 if
cnanged,	, or on an autachment with an address, wi	n air other like empowered.					<b>C</b>

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR