


**2005 FOR PROFIT CORPORATION.
ANNUAL REPORT**

FILED
Feb 12, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000061173
1. Entity Name
ISLA CORPORATION



Principal Place of Business 201 S BISCAYNE BLVD 34TH FLOOR-MIAMI CENTER MIAMI, FL 33131	Mailing Address 201 S BISCAYNE BLVD 34TH FLOOR-MIAMI CENTER MIAMI, FL 33131
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02082005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0851705	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FERRELL GROUP CORPORATE SERVICE, LLC
201 S BISCAYNE BLVD
STE 3400
MIAMI, FL 33131

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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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS DE LA ROCHA, IGNACIO 201 S BISCAYNE BLVD, 34TH FL-MIAMI CENTER MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT DE LA ROCHA, LAURA AMALIA 201 S BISCAYNE BLVD, 34TH FL-MIAMI CENTER MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DEL VALLE, IGNACIO G 201 S BISCAYNE BLVD, 34TH FL-MIAMI CENTER MIAMI, FL 33131
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02/12/05-80042-015 150.00

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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 like empowered.

SIGNATURE: Ignacio G. del Valle as Asst. Sec. 2/8/05 305-377-8585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #