

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000082886

FILED
May 12, 2004
Secretary of State

Entity Name: PRISMA COLORS CORP.

Current Principal Place of Business:

8286 NW 66 STREET
MIAMI, FL 33166

New Principal Place of Business:

10100 NW 116TH WAY
SUITE 15
MEDLEY, FL 33178

Current Mailing Address:

8286 NW 66 STREET
MIAMI, FL 33166

New Mailing Address:

10100 NW 116TH WAY
SUITE 15
MEDLEY, FL 33178

FEI Number: 65-0864628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, KARLA L
4890 NW 102 AVE #101
MIAMI, FL 33178 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: P () Delete
Name: PEREZ, KARLA
Address: 8286 NW 66 STREET
City-St-Zip: MIAMI, FL 33166

Title: V () Delete
Name: PEREZ, CARLOS A
Address: 8286 NW 66 STREET
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PEREZ, KARLA
Address: 10100 NW 116TH WAY SUITE 15
City-St-Zip: MEDLEY, FL 33178

Title: V (X) Change () Addition
Name: PEREZ, CARLOS A
Address: 10100 NW 116TH WAY SUITE 15
City-St-Zip: MEDLEY, FL 33178

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: KARLA PEREZ

P

05/12/2004

Electronic Signature of Signing Officer or Director

_____ Date