

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000039513

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: CDO TECHNOLOGICAL PARTNER, INC.

**Current Principal Place of Business:**

13255 SW 57TH TERR  
BLDG 14 UNIT 1  
MIAMI, FL 33183

**New Principal Place of Business:**

**Current Mailing Address:**

300 SEVILLA AVENUE  
201  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 59-3575196      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MUNOZ, MARIA ELENA  
5512 NW 72 AVE  
MIAMI, FL 33166      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MUNOZ, GUSTAVO  
Address: 5512 NW 72 AVENUE  
City-St-Zip: MIAMI, FL 33166

Title: VD ( ) Delete  
Name: MUNOZ, MARIA E  
Address: 5512 NW 72 AVENUE  
City-St-Zip: MIAMI, FL 33166

Title: TD ( ) Delete  
Name: MUNOZ, JOSE LUIS  
Address: 5512 NW 72 AVENUE  
City-St-Zip: MIAMI, FL 33166

Title: SD ( ) Delete  
Name: MUNOZ, EDWIN A  
Address: 5512 NW 72 AVENUE  
City-St-Zip: MIAMI, FL 33166

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GUSTAVO MUNOZ

PD

04/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date