

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S85009

FILED
Feb 20, 2004
Secretary of State

Entity Name: CORAL GABLES IMPORTS, INC.

Current Principal Place of Business:

200 BIRD ROAD
MIAMI, FL 33146

New Principal Place of Business:

Current Mailing Address:

200 BIRD ROAD
MIAMI, FL 33146

New Mailing Address:

FEI Number: 65-0284932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARKS, EVAN
INTERNATIONAL PLACE
100 S.E. 2ND STREET, SUITE 2700
MIAMI, FL 33131 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: C () Delete
Name: COLOMBO, UGO
Address: 701 BRICKELL AVE STE 3150
City-St-Zip: MIAMI, FL

Title: P () Delete
Name: GORIN, KENNETH
Address: 200 BIRD ROAD
City-St-Zip: CORAL GABLES, FL 33146

Title: T () Delete
Name: MURPHY, ARTHUR J.
Address: 701 BRICKELL AVE STE 3150
City-St-Zip: MIAMI, FL

Title: VPS () Delete
Name: RUSTIN, LAWRENCE
Address: 200 BIRD ROAD
City-St-Zip: CORAL GABLES, FL

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: UGO COLOMBO

CMN

02/20/2004

Electronic Signature of Signing Officer or Director

_____ Date