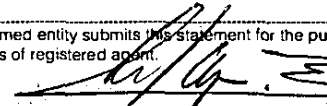
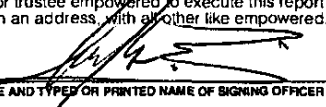


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90014 039 ***158.75

DOCUMENT # S90465 1. Entity Name D.F.E.I., CORP.					
Principal Place of Business 7951 NW 21 STREET MIAMI, FL 33122 US			Mailing Address 7951 NW 21 STREET MIAMI, FL 33122 US		
2. Principal Place of Business 7977 NW 21 STREET Suite, Apt. #, etc.			3. Mailing Address 7977 NW 21 STREET Suite, Apt. #, etc.		
City & State MIAMI FL			City & State MIAMI FL		
Zip 33122		Country		Zip 33122	
Country		Country		4. FEI Number 65-0297353	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent UIPAN, ANTONIO 7951 NW 21 STREET MIAMI, FL 33122			7. Name and Address of New Registered Agent Name UIPAN, ANTONIO Street Address (P.O. Box Number is Not Acceptable) 7977 NW 21 STREET City MIAMI FL Zip Code 33122		
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  Antonio Uipan 03-31-04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD UIPAN, ANTONIO 7991 NW 21 ST MIAMI, FL 33122	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD UIPAN, ANTONIO 7977 NW 21 STREET MIAMI, FL 33122	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
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:  Antonio Uipan 03-31-04 (305) 477-2270 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					