2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

ANNUAL REPORT (AR)					جئ	11 25			
DOCUMENT # V54353 1. Entity Name						TLED			
2255 INC.				04 HAR 2		:01			
Principal Place	e of Business	Mailing Address			SEC.	ું કુ	ATE		
2255 SW 7TH STREET MIAMI FL 33125		9280 SW 150 AVENUE SUITE 105 MIAMI FL 33196			1 188 0 01181 1 10	I RIBES IIISI EIEES	- 177 4 	IE U191 FEB1	171 N (110)
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		MOOF	7E (CR2E034 (11	/03)		
City & State		City & State			4. FEI Number 65-	-0351565)	_	olied For Applicable
Zip	Country	Zip	Country		5. Certificate of Statu	ıs Desired		75 Addit Required	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent									
ESP	INEL, PAULMO O SW 150 AVE SUITE 105	Name ESP Street Address			(P.O. Box Number is Not Acceptable)				
	MI FL 33196		929	30 S	W 150 A	ie.	Cite-	1	05
			City	1104	ui	<u>: • </u>	FL 2	Zio Code	76
8. The above hamed whith 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 agistred agent.									
SIGNATURE Signature, hybrid or largised agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE								<u>-</u>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANG	SES TO OFFI	ICERS AND DIR	ECTORS	IN 11
TITLE NAME	DP ESPINEL, PAULI Y O	☐ Delete	TITLE NAME	ı— ·	INEL PAUL		I suite	Change	Addition
STREET ADDRESS CITY-ST-ZIP	9280 SW 150 AVE SUITE 105 MIAMI FL 33196		STREET ADDRESS CITY-ST-ZIP	92 H	80 Sw 150 14km +	33		,04	
TITLE NAME	DS ESPINEL, MICHAEL	☐ Delete	TITLE NAMÉ				_	Change	Addition
STREET ADDRESS CITY-ST-ZIP	9280 SW 150 AVE SUITE 105 MIAMI FL 33196		STREET ADDRESS CITY-ST-ZIP		5000 03/31/04	3154 01017	47005 020 **16	5 650.0(3
TITLE NAME	DT ESPINEL, PAULINO	☐ Delete	TITLE NAME					Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	9280 SW 150 AVE SUITE 105 MIAMI FL 33196		STREET ADDRESS CITY-ST-ZIP						
TITLE NAME		☐ Delete	TITLE NAME					Change	☐ Addition
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TITLE NAME		☐ Defete	TITLE NAME					Change	Addition
STREET ADDRESS CITY-ST-ZIP		·	STREET ADDRESS CITY-ST-ZIP						•
12. I hereby	certify that the information supplied with	this filing does not qualify for	the exemption sta	ated in Se	ection 119.07(3)(i), Florid	da Statutes.	I further certify to	hat the in	formation

indicated on this report or supplymental report is true and accurate and the tray sonature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the relative for trustee empowered to accurate and the trustee empowered to accurate the trustee empowered to

SIGNATURE:

Miami FI 33196

3 22 2004 301 126862