

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S70636

FILED
Jan 09, 2004
Secretary of State

Entity Name: TUVALEX CORP., INC.

Current Principal Place of Business:

2801 NW 74 AVENUE
#207
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

2801 NW 74 AVENUE
#207
MIAMI, FL 33122

New Mailing Address:

FEI Number: 65-0329154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRIGANTE, MIGUEL
2801 NW 74 AVENUE
#207
MIAMI, FL 33122

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: P () Delete
Name: DACCARETT GIHA, CARLOS A
Address: VIA 40 #71 - 299
City-St-Zip: BARRANQUILLA, COLUMBIA,

Title: S () Delete
Name: DE DACCARETTE, ZORAIDA MARIA A
Address: VIA 40 #71 - 299
City-St-Zip: BARRANQUILLA, COLUMBIA,

Title: V () Delete
Name: DACCARETT A., CARLOS, J.
Address: VIA 40 #71 - 299
City-St-Zip: BARRANQUILLA, COLUMBIA,

Title: V () Delete
Name: DACCARETT A., IVAN,
Address: VIA 40 #71 - 299
City-St-Zip: BARRANQUILLA, COLUMBIA,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DACCARETT GIHA, CARLOS A
Address: 2801 NW 74 AVENUE
City-St-Zip: MIAMI, FL 33122

Title: S (X) Change () Addition
Name: DE DACCARETTE, ZORAIDA MARIA A
Address: 2801 NW 74 AVENUE
City-St-Zip: MIAMI, FL 33122

Title: V (X) Change () Addition
Name: DACCARETT A., CARLOS, J.
Address: 2801 NW 74 AVENUE
City-St-Zip: MIAMI, FL 33122

Title: V (X) Change () Addition
Name: DACCARETT A., IVAN,
Address: 2801 NW 74 AVENUE
City-St-Zip: MIAMI, FL 33122

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: CARLOS DACCARETT

P

01/09/2004

Electronic Signature of Signing Officer or Director

_____ Date