2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010871

Address:

City-St-Zip:

CORAL GABLES, FL 33146

FILED Apr 30, 2004 Secretary of State

Entity Name: AIZCORBE-CUETO INTERIORS, INC. **Current Principal Place of Business: New Principal Place of Business:** 6701 SW 116 COURT #109 MIAMI, FL 33178 US **New Mailing Address: Current Mailing Address:** 424 CASTONIA AVENUE CORAL GABLES, FL 33146 US FEI Number: 65-1076375 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AIZCORBE-CUETO, LOURDES T 424 CASTONIA AVÉNUE CORAL GABLES, FL 33146 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition AIZCORBE-CUETO, LOURDES Name: Name: 424 CASTONIA AVENUE Address: Address: City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: Title: Title: () Change () Addition () Delete Name: AIZCORBE-CUETO, LOURDES T Name: 424 CASTONIA AVENUE 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 Statutés. 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: LOURDES T AIZCORBE-CUETO Ρ 04/30/2004