2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006482

Address:

City-St-Zip:

FILED Jan 17, 2005 Secretary of State

Entity Nar	me: MIPAN C	CORP					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
1416 SUM	MITT PINES E	BLVD.					
1013							
WEST PAI	LM BEACH, F	L 33415					
Current Mailing Address:			New Maili	New Mailing Address:			
1416 SUM 1013	MITT PINES E	BLVD.,					
WEST PAI	LM BEACH, F	L 33415					
FEI Number:	: 33-1020790	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1416 SUM 1013 WEST PAI The above	EZ, ISAAC MITT PINES E LM BEACH, F named entity e of Florida.	L 33415 US	e purpose of changing i	ts registered	office or registered agent, or	both,	
SIGNATUR		oio Cinnotono of Donistano d'A	ara ut		D-+-		
	Electro	nic Signature of Registered A	gent		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	RODRIGUEZ, 1416 SUMMIT) Delete SAAC PINES BLVD., APT. 1013 EACH, FL 33415	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	GARY, GARM 6600 BELVED		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DAGOGLIANO 1416 SUMMIT) Delete , MIGUEL r PINES BLVD., APT.1013 EACH, FL 33415	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name:	SD (DARVAS, LEO) Delete NOR	Title: Name:	SD (X) Change()Addition QUEZ		

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

1416 SUMMITT PINES BLVD., APT.1013

WEST PALM BEACH, FL 33415

SIGNATURE: ISAAC RODRIGUEZ PD 01/17/2005

1416 SUMMITT PINES BLVD., APT.1013

WEST PALM BEACH, FL 33415