


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # 478372
 1. Entity Name
CANTELOP PROPERTY INVESTMENT, INC.



Principal Place of Business Mailing Address
2300 CORAL WAY **2300 CORAL WAY**
SUITE 200 **SUITE 200**
MIAMI, FL 33145 **MIAMI, FL 33145**

DO NOT WRITE IN THIS SPACE



02072004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
59-2124810 Not Applicable

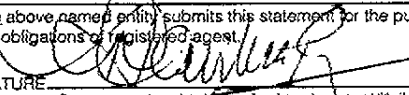
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES, INC.
2300 CORAL WAY
SUITE 200
MIAMI, FL 33145

DO NOT WRITE IN THIS SPACE

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:  **AMADA CANTERA LOPEZ** **3/15/04**
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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**

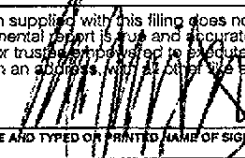
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOPEZ-AGUIAR, CARLOS C 2300 CORAL WAY SUITE 200 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CANTERA LOPEZ, AMADA 2300 CORAL WAY SUITE 200 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LOPEZ-CANTERA, AMADA 2300 CORAL WAY SUITE 200 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LOPEZ-CANTERA, CARLOS C 2300 CORAL WAY SUITE 200 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000097525
 03/29/04-80004-009 150.00

DO NOT WRITE IN THIS SPACE

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 file 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 an officer or director empowered.

SIGNATURE:  **3/15/04** **856 0056**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CARLOS C. LOPEZ AGUIAR