2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 538308

FILED Feb 15, 2005 Secretary of State

Entity Name: GUERRA-GALINDEZ & MURIAS-BOUDET, P. A. **New Principal Place of Business: Current Principal Place of Business:** 401 S.W. 27TH AVE. MIAMI, FL 33135 **Current Mailing Address: New Mailing Address:** 401 S.W. 27TH AVE. MIAMI, FL 33135 FEI Number: 59-1745027 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: FORMOSO-MURIAS, ZIMBLE ESQ FORMOSO-MURIAS, HECTOR ESQ 401 SW 27TH AVE 2ND FLOOR 401 SW 27TH AVE 2ND FLOOR MIAMI, FL 33135 MIAMI, FL 33135 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: HECTOR FORMOSO-MURIAS 02/15/2005 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 GUERRA-GALINDEZ, MAR, IA Name: Name: 1701 S.W. 104TH AVE. Address: Address: City-St-Zip: MIAMI FL, City-St-Zip: Title: DVST Title: () Change () Addition () Delete Name: MURIAS-BOUDET, LEONO, R Name: 1711 S.W. 104TH AVE. Address: Address: MIAMI FL, City-St-Zip: 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 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: MARIA GUERRA-GALINDEZ PD 02/15/2005