

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 573677

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: CONESA ENTERPRISES, INC.

**Current Principal Place of Business:**

10745 SW 32ND STREET  
MIAMI, FL 33165

**New Principal Place of Business:**

20701 WILLIAMS DR.  
NORTH FT. MYERS, FL 33917

**Current Mailing Address:**

10745 SW 32ND STREET  
MIAMI, FL 33165

**New Mailing Address:**

20701 WILLIAMS DR.  
NORTH FT. MYERS, FL 33917

FEI Number: 59-1915087

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PEREZ, JOHN W  
10745 SW 32ND STREET  
MIAMI, FL 33165 US

**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: PEREZ, JOHN W  
Address: 10745 SW 32ND STREET  
City-St-Zip: MIAMI, FL 33165

Title: VP ( ) Delete  
Name: PEREZ, ROGER  
Address: 10745 SW 32ND STREET  
City-St-Zip: MIAMI, FL 33165

Title: STD ( ) Delete  
Name: PEREZ, NERIDA  
Address: 10745 SW 32ND STREET  
City-St-Zip: MIAMI, FL 33165

Title: VP ( ) Delete  
Name: PEREZ, ROBERT  
Address: 10705 W. 32ST  
City-St-Zip: MIAMI, FL 33165

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: PEREZ, WILFRED  
Address: 20701 WILLIAMS DR.  
City-St-Zip: NORTH FT. MYERS, FL 33917

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOHN W.PEREZ

P

04/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date