

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 592322

FILED  
Jan 07, 2004  
Secretary of State

Entity Name: NEMESIO OFFICE EQUIPMENT DISTRIBUTORS, INC.

## Current Principal Place of Business:

2400 NW 94 AVENUE  
MIAMI, FL 33172 US

## New Principal Place of Business:

## Current Mailing Address:

2400 NW 94 AVENUE  
MIAMI, FL 33172 US

## New Mailing Address:

FEI Number: 59-1862714

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARABALLO, YOLANDO  
2400 NW 94TH AVE  
MIAMI, FL 33172 US

## Name and Address of New Registered Agent:

CARABALLO, YOLANDA  
2400 NW 94TH AVE  
MIAMI, FL 33172 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: YOLANDA CARABALLO

01/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CARABALLO, YOLANDA  
Address: 2400 NW 94TH AVE  
City-St-Zip: MIAMI, FL 33172

Title: VP ( ) Delete  
Name: SOLER, YOLANDA,  
Address: 2400 NW 94TH AVE  
City-St-Zip: MIAMI, FL 33172

Title: S ( ) Delete  
Name: SUAREZ, YEILANY  
Address: 2400 NW 94TH AVE  
City-St-Zip: MIAMI, FL 33172

Title: T ( ) Delete  
Name: ANDUX, YILIAM  
Address: 2400 NW 94TH AVE  
City-St-Zip: MIAMI, FL 33172

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SUAREZ, YEILANY  
Address: 2400 NW 94TH AVE  
City-St-Zip: MIAMI, FL 33172

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

Title: S (X) Change ( ) Addition  
Name: ANDUX, YILIAM  
Address: 2400 NW 94TH AVE  
City-St-Zip: MIAMI, FL 33172

Title: ( ) Change ( ) Addition  
Name:  
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 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: YOLANDA SOLER

VP

01/07/2004

Electronic Signature of Signing Officer or Director

Date