## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 676867**

Entity Name: CARBEN, INC.

FILED Jan 07, 2005 Secretary of State

Current Dr	incinal Dlace	of Business	New Dringing Place	of Business	
Current Principal Place of Business:			·	New Principal Place of Business:	
8600 N.W. 17TH STREET. MIAMI, FL 33126 US			130		
Current Ma	ailing Address	s:	New Mailing Address		
	_		_		
MIAMI, FL	17TH STREET 33126		8600 N.W. 17TH STRI 130 MIAMI, FL 33126	<u>=</u> E1.	
FEI Number:	59-2127845	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:	
WESLEY M. ROBINSON 501 BRICKELL KEY DRIVE, SUITE 504 MIAMI, FL 33131 US					
The above in the State		ubmits this statement for the pur	pose of changing its registered	d office or registered agent, or both,	
SIGNATUR	E:				
	Electroni	c Signature of Registered Agent		Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR					
Title:	C ()	Delete	Title:	() Change () Addition	
Name:	PAIZ, CARLOS I		Name:		
Address: City-St-Zip:	12 CALLE 1-80, GUATEMALA CI		Address: City-St-Zip:		
Title:	D ()	Delete	Title:	() Change () Addition	
Name:	PINTO, HECTOR		Name:		
Address: City-St-Zip:	12 CALLE 1-80, GUATEMALA CI		Address: City-St-Zip:		
Oity Ot Zip.	33, (12,11), (2,1,0)	11, 30	only of zip.		
Title:	` '	Delete	Title:	( ) Change ( ) Addition	
Name: Address:	RODRIGUEZ, AN		Name:		
City-St-Zip:	12 CALLE 1-80, GUATEMALA CI		Address: City-St-Zip:		
Title:	D ()	Delete	Title:	() Change () Addition	
Name:	CHIU, MARIO		Name:		
Address:	12 CALLE 1-80,		Address:		
City-St-Zip:	GUATEMALA CI	1 f , GO	City-St-Zip:		
Title:	S ()	Delete	Title:	( ) Change ( ) Addition	
Name:	PAIZ, JOSE CAF		Name:		
Address: City-St-Zip:	12 CALLE 1-80 2 GUATEMALA CI		Address: City-St-Zip:		
Oity-Ot-Zip.	GOAT LIVIALA CI	11,00	Gity-Gt-Zip.		
Title:	. ,	Delete	Title:	( ) Change ( ) Addition	
Name:	PELAYO, AMER		Name:		
Address: City-St-Zip:	8600 NW 17TH : MIAMI, FL 3312		Address: City-St-Zip:		
Oity-Ot-Zip.	ivii/sivii, I L JJ 12		Οπ <del>υ</del> -οι-Ζιμ.		

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: AMERICA PELAYO PG 01/07/2005