

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2004 08:00 AM
Secretary of State



DOCUMENT # 722649				1. Entity Name	
PRO-ARTE GRATELI, INC.					
Principal Place of Business		Mailing Address			
1059 SW 27 AVE MIAMI FL 33135		1059 SW 27 AVE MIAMI FL 33135			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number	
				59-1405398	
5. Certificate of Status Desired				<input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
DE LA ROSA, PILI 642 NW 136 AVE MIAMI FL 33182			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City	FL	Zip Code
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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2004 **9. Election Campaign Financing Trust Fund Contribution.** **\$5.00 May Be Added to Fees** **Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD DE LA ROSA, PILI	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	642 NW 136 AVE		STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33182		CITY - ST - ZIP		
STREET ADDRESS	3551 SW 9TH TERRACE #511		STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33135		CITY - ST - ZIP		
STREET ADDRESS	642 NW 136 AVE		STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33182		CITY - ST - ZIP		
STREET ADDRESS	642 NW 136 AVE		STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33182		CITY - ST - ZIP		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		

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 execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Pili de la Rosa* **MARCH 16/2004 (305) 642-693**