


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005 8:00 am
Secretary of State

01-26-2005 90029 022 ***158.75

DOCUMENT # F00000004711

1. Entity Name
TOD01 SERVICES, INC.



Principal Place of Business Mailing Address

7400 NW 19TH STREET 7400 NW 19TH STREET
 #C #C
 MIAMI, FL 33126 MIAMI, FL 33126

50007029



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

01042005 Chg-P CR2E034 (10/03)

4. FEI Number Applied For

52-2249861 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPDIRECT AGENTS
103 N. MERIDIAN ST., LOWER LEVEL
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

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 reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

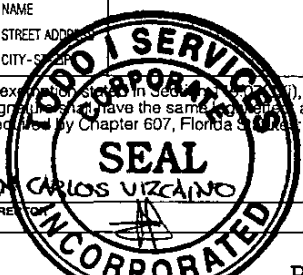
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
D	LEIROS, ARMANDO		
7400 NW 19TH STREET STE C MIAMI, FL 33126		CEO/P SALDARRIAGA, JULIAN	
			7400 NW 19th STREET STE C MIAMI, FL 33126
S	TRUJILLO, IVAN		
7400 NW 19TH STREET STE C MIAMI, FL 33126			
D	MARTURET, GUSTAVO		
7400 NW 19TH STREET STE C MIAMI, FL 33126			
T	VIZCAINO, JUAN CARLOS		
7400 NW 19TH STREET STE C MIAMI, FL 33126			
CD	LONDONO, JORGE		
7400 NW 19TH STREET MIAMI, FL 33126			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption provided in Section 607.02(1), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature is the same 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **JUAN CARLOS VIZCAINO** Date: **01/21/05**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # **788 330000**



PLEASE SEE ATTACHED

ATTACHMENT

~~FD000000~~04711

50007029

TODO 1)

Please include the Directors below:

Title: D

Name: EGAS GRIJALVA, FIDEL

Street Address: 7400 NW 19th STREET STE C

City-ST-ZIP: MIAMI, FL 33126

Title: D

Name: AGUDELO, GABRIEL JAIME

Street Address: 7400 NW 19th STREET STE C

City-ST-ZIP: MIAMI, FL 33126

JUAN CARLOS SUZCANO

