

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002069

FILED
May 26, 2004
Secretary of State

Entity Name: NICOCARDS, INC.

Current Principal Place of Business:

2600 SW 3RD AVENUE, STE. 705
MIAMI, FL 33129 US

Current Mailing Address:

2600 SW 3RD AVENUE, STE. 705
MIAMI, FL 33129 US

New Principal Place of Business:

9200 SOUTH DADELAND BLVD.
410
MIAMI, FL 33156 US

New Mailing Address:

1627 BRICKELL AV.
2904
MIAMI, FL 33129 US

FEI Number: 65-1007589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, ADAM T ESQ
2601 SOUTH BAYSHORE DRIVE
STE. 1600
MIAMI, FL 33129 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: DPAS () Delete
Name: CHAMAS, BORIS
Address: 2600 SW 3RD AVENUE
City-St-Zip: MIAMI, FL 33129 US

Title: D () Delete
Name: LUCIA BAENA, GLORIA
Address: 2600 SW 3RD AVENUE
City-St-Zip: MIAMI, FL 33129 US

Title: T () Delete
Name: TORRES, HERNAN
Address: 2600 SW 3RD AVENUE
City-St-Zip: MIAMI, FL 33129 US

Title: S () Delete
Name: DE OLIVEIRA, CLAUDIA
Address: 2600 SW 3RD AVENUE
City-St-Zip: MIAMI, FL 33129 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPAS (X) Change () Addition
Name: CHAMAS, BORIS
Address: 1627 BRICKELL AV. #2904
City-St-Zip: MIAMI, FL 33129 US

Title: D (X) Change () Addition
Name: LUCIA BAENA, GLORIA
Address: 1627 BRICKELL AV. #2904
City-St-Zip: MIAMI, FL 33129 US

Title: T (X) Change () Addition
Name: TORRES, HERNAN
Address: 1627 BRICKELL AV. #2904
City-St-Zip: MIAMI, FL 33129 US

Title: S (X) Change () Addition
Name: DE OLIVEIRA, CLAUDIA
Address: 1627 BRICKELL AV. #2904
City-St-Zip: MIAMI, FL 33129 US

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: BORIS CHAMAS

P

05/26/2004

Electronic Signature of Signing Officer or Director

Date