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May 03, 2004 8:00 am
Secretary of State
05-03-2004 90653 006 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F01000005817

94080545

1. Entity Name
PRODDUCCIONES THOMAS, OCHOA & ASSOCIATES, INC.

Principal Place of Business	Mailing Address
7058 NW 77 CT STE 100 MIAMI, FL 33166	7058 NW 77 CT STE 100 MIAMI, FL 33166 US

04282004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
7058 NW 77 CT	7058 NW 77 CT
Suite, Apt. #, etc.: SUITE 100	Suite, Apt. #, etc.: SUITE 100
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33166 Country: USA	Zip: 33166 Country: USA

4. FEI Number: 94-3414537 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MARTINEZ, MARITZA
7058 NW 77 CT
STE 100
MIAMI, FL 33166

7. Name and Address of New Registered Agent

Name: MARITZA MARTINEZ
Street Address (P.O. Box Number is Not Acceptable): 7058 NW 77 CT
SUITE 100
City: MIAMI FL Zip Code: 33166

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: MARITZA MARTINEZ
(Registered Agent Signature Required When Applicable) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 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	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P THOMAS HERNANDEZ, RADHAMES A AVE. BERMUDEZ EN CALLE STA. ANA & AVE CARACAS, VENEZUELA, ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTINEZ, MARITZA 7058 NW 77 CT STE 100 MIAMI, FL 33166 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition DIRECTOR
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition MARITZA MARTINEZ 7058 NW 77 CT SUITE 100 MIAMI, FL 33166
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 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.

305-463-8303

SIGNATURE: Maritza Martinez MARITZA MARTINEZ DIRECTOR 05/03/2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #