

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006340

FILED
Jan 04, 2005
Secretary of State

Entity Name: CORDIA CORPORATION

Current Principal Place of Business:

2500 SILVERSTAR RD.
STE. 500
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

445 HAMILTON AVE.
STE. 408
WHITE PLAINS, NY 10601

New Mailing Address:

FEI Number: 11-2917728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, PATRICK
2500 SILVERSTAR RD.
STE. 500
ORLANDO, FL 32804 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: DP () Delete
Name: FREEMAN, PATRICK
Address: 124 OLYMPOS DR
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: SCAGNELLI, JOHN
Address: 4 BELLE HAVEN CT
City-St-Zip: WEST NYACK, NY

Title: DS () Delete
Name: MINELLA, WESLY
Address: 34 CIRCUIT ROAD
City-St-Zip: NEW ROCHELLE, NY 10801

Title: T () Delete
Name: GUERRERA, LORIE
Address: 26 SAMANTHA DRIVE
City-St-Zip: CORAM, NY 11727

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FREEMAN, PATRICK
Address: 2500 SILVERSTAR ROAD, SUITE 500
City-St-Zip: ORLANDO, FL 32804

Title: D (X) Change () Addition
Name: SCAGNELLI, JOHN
Address: 445 HAMILTON AVENUE, SUITE 408
City-St-Zip: WHITE PLAINS, NY 10601

Title: DS (X) Change () Addition
Name: MINELLA, WESLY
Address: 445 HAMILTON AVENUE, SUITE 408
City-St-Zip: WHITE PLAINS, NY 10601

Title: T (X) Change () Addition
Name: GUERRERA, LORIE
Address: 445 HAMILTON AVENUE SUITE 408
City-St-Zip: WHITE PLAINS, NY 10601

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: /LORIE M. GUERRERA/

T

01/04/2005

Electronic Signature of Signing Officer or Director

_____ Date