## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000002866

Entity Name: TONITO CORP.

City-St-Zip:

BUENOS AIRES, ARGENTINA,

FILED Apr 30, 2004 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal I	New Principal Place of Business:		
C/O ROBLES Y ROBLES, CALLE 50, EDIFICIO PLAZA BANCOMER, PISO 19 PANAMA,				201 SOUTH BISCAYNE BOULEVARD		
			1500 MIAMI, FL 3313	MIAMI, FL 33131 US		
Current M	lailing Addre	ss:	New Mailing Ac	New Mailing Address:		
C/O ROBLES Y ROBLES, CALLE 50, EDIFICIO PLAZA BANCOMER, PISO 19 PANAMA,				201 SOUTH BISCAYNE BOULEVARD 1500 MIAMI, FL 33131 US		
FEI Number	: 56-2359302	FEI Number Applied For ( )	FEI Number Not Applicable	( )	Certificate of Status Desired (X)	
Name and	d Address of	Current Registered Agent:	Name and Add	Name and Address of New Registered Agent:		
	TH BISCAYNE	ANY OF MIAMI BLVD., 15TH FLOOR/PLM				
The above in the State	e named entity e of Florida.	submits this statement for the p	purpose of changing its reg	istered o	office or registered agent, or both,	
SIGNATU	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Ca	mpaign Financii	ng Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	ROCA, ANTO JUANA MANS	) Delete NIO D 740, 10 PISO, APT. 02 ES, ARGENTINA,	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ROCA, VALEF JUANA MANS	) Delete RIA D 740, 10 PISO, APT. 02 ES, ARGENTINA,	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	ROCA, MARTA JUANA MANS	) Delete A D 740, 10 PISO, APT. 02 ES, ARGENTINA,	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address:	ROCA, SEBAS	) Delete STIAN D 740, 10 PISO, APT, 02	Title: Name: Address:	(	) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: ANTONIO ROCA PD 04/30/2004