²⁰⁰⁵ NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Feb 03, 2005 08:00 AM DOCUMENT # F04000001044 Secretary of State 1. Entity Name CREAD, INC. Principal Place of Business Mailing Address 1750 NE 167TH STREET 1750 NE 167TH STREET NORTH MIAMI BEACH, FL 33162 NORTH MIAMI BEACH, FL 33162 01072005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 25-1725567 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VILLARROEL, ARMANDO DO NOT WRITE 1750 NE 167TH STREET NORTH MIAMI BEACH, FL 33162 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstalling) 9. Election Campaign Financing **\$5.00** May Be Filing Fee is \$61.25 Trust Fund Contribution. Added to Fees Due by May 1, 2005 10. OFFICERS AND DIRECTORS TITLE #00000213070 02/03/05-80056-004 61.25 NAME MUNOZ, PATRICIA AVILA LIC. STREET ADDRESS CALLE DEL PUENTE #45, COLONIA EJIDOS DE HU CITY-ST-ZIP IPULCO MEXICO DF, MEXICO, TITLE VILLARROEL, ARMANDO DR. STREET ADDRESS 1750 NE 167TH ST CITY-ST-ZIP NORTH MIAMI BEACH, FL 331623017 TITLE RUIZ, JAMIE A. R STREET ADDRESS CRA, 7A. NO. 42-27, CUARTO PISO - EDIFICIO DO NOT WRITE CITY-ST-ZIP LOR URI-SANTAFE DE BOGOTA,CO, IN THIS SPACE TITLE WAGONER, NANCY VAN DR. NAME STREET ADDRESS ACADIA UNIVERSITY, CONT. & DIST. EDU. CITY-ST-ZIP WOLFVILLE NS B4P 2R6 CANADA, TITLE MASSICOTTE, GUY DR. STREET ADDRESS UNIVERSITE DU QUEBEC - 475, RUE DE L'ENG. CITY-ST-ZIP

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addless, with all other like empowered.

TITLE

NAME STREET ADDRESS QUEBEC, QUEBEC G1K 9H7, CAN.,

BUENOS AIRES 1098, ARGENTINA,

SIVORI, RODOLFO ANGEL LIC.

CHILE 554 - DTO.11

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