2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005761

Entity Name: NEXT STEP MARKETING AND SPECIAL EVENTS, INC.

FILED Apr 22, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
PO BOX 362114 SJ, PR 00936-2114,				PO BOX 362114 SAN JUAN, PR 009362114 US			
Current Mailing Address:				New Mailing Address:			
3530 MYSTIC POINTE DR. #215 AVENTURA, FL 33180				3530 MYSTIC POINTE DR. #215 AVENTURA, FL 33180 US			
FEI Number:	66-0522455	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desir	ed()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
MENDEZ, MARIFE 3530 MYSTIC POINTE DR. #215 AVENTURA, FL 33180 US				MENDEZ, MARIFE 3530 MYSTIC POINTE DR. #215 AVENTURA, FL 33180 US			
The above in the State	named entity su of Florida.	bmits this statement for the purp	oose of	f changing it	s registered of	ffice or registered agent	, or both,
SIGNATURE:				04/22/2005			
Electronic Signature of Registered Agent				Date			
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip: Title:	MENDEZ, MARIF 3530 MYSTIC PC AVENTURA, FL	DINTE DR. #215		Title: Name: Address: City-St-Zip: Title:	MENDEZ, MARI 3530 MYSTIC P AVENTURA, FL	OINTE DR. #215	
Name: Address: City-St-Zip:	MENDEZ, FELIX C-29 RUFINO RO GUAYNABO, PR	DRIGUEZ		Name: Address: City-St-Zip:	MENDEZ, FELÍX C-29 RUFINO R GUAYNABO, PR	(ODRIGUEZ	
Title: Name: Address: City-St-Zip:	D () E ORTIZ, ANGELA 3530 MYSTIC PO AVENTURA, FL			Title: Name: Address: City-St-Zip:	S (X) GONZALEZ, AN C-29 RUFINO R GUAYNABO, PR	ODRIGUEZ	
Title: Name: Address: City-St-Zip:	S () E GONZALEZ, ANT C-29 RUFINO RO GUAYNABO, PR	DRIGUEZ		Title: Name: Address: City-St-Zip:	T (X) MENDEZ, FELIX C-29 RUFINO R GUAYNABO, PR	ODRIGUEZ	
Title: Name: Address: City-St-Zip:	T (X) I HENDEZ, FELIX C-29 RUFINO RO GUAYNABO, PR			Title: Name: Address: City-St-Zip:	()	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.

SIGNATURE: MARIFE MENDEZ P 04/22/2005