


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2004 08:00 AM
Secretary of State

DOCUMENT # F23025
 1. Entity Name
 ELIAS LEGRA, INC.



Principal Place of Business % ELIAS LEGRA 525 EAST 9TH STREET HIALEAH, FL 33010	Mailing Address % ELIAS LEGRA 525 EAST 9TH STREET HIALEAH, FL 33010
------------------------------------------------------------------------------------------	------------------------------------------------------------------------------

DO NOT WRITE IN THIS SPACE



01132004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2064527	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 LEGRA, ELIAS
 525 EAST 9TH ST
 HIALEAH, FL 33010

DO NOT WRITE 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEGRA, ELIAS 525 E 9TH ST HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LEGRA, ELEAZAR 7151 W 19TH COURT HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LEGRA, ELIAS JR 525 E 9 STREET HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000015452
 01/28/04-80015-012 150.00

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: *Elias Legra* 1/22/04 (305)887-8249