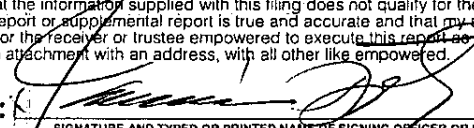


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 28, 2004 8:00 am
Secretary of State

06-28-2004 90008 042 ***550.00

DOCUMENT # F57477 1. Entity Name FRALURA INC.			
Principal Place of Business 717 PONCE DE LEON BLVD SUITE 214 CORAL GABLES, FL 33134 US		Mailing Address 717 PONCE DE LEON BLVD SUITE 214 CORAL GABLES, FL 33134 US	
2. Principal Place of Business 250 CATALONIA Suite, Apt. #, etc. S-401		3. Mailing Address Same Suite, Apt. #, etc.	
City & State CORAL GABLES, FL Zip 33134 Country U.S.A.		City & State Zip Country	
4. FEI Number 59-2435227		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		03122004 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent DURAN, ALFREDO G. 2600 BAY SHORE DR S 1400 MIAMI, FL 33133		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DORTA, RAMON E 717 PONCE DE LEON BLVD., S214 CORAL GABLES, FL 33134 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ALL ADDRESS CHANGES 250 CATALONIA AVE S-401 CORAL GABLES, FL 33134 ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DORTA, RAMON 717 PONCE DE LEON BLVD., S214 CORAL GABLES, FL 33134 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DORTA, FRANCISCO 717 PONCE DE LEON BLVD., S214 CORAL GABLES, FL 33134 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DORTA, LUIS 717 PONCE DE LEON BLVD., S214 CORAL GABLES, FL 33134 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS DORTA, EDUARDO 717 PONCE DE LEON BLVD, S214 CORAL GABLES, FL 33134 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: 		RAMON DORTA 8/12/04 807-567-0097 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	