2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F93000000110

1. Entity Name KAYSER INVESTMENTS, S.A.



FILED Feb 09, 2004 08:00 AM Secretary of State

Principal Place of Business

4001 N. OCEAN BLVD., #401B BOCA RATON, FL 33431 Mailing Address

4001 N. OCEAN BLVD., #401B BOCA RATON, FL 33431



01092004

No Chg-P

CR2E034 (10/03)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

VAN BERGH, ANITA 4001 N. OCEAN BLVD #4018 BOCA RATON, FL 33431

SIGNATURE:

DO NOT WRITE IN THIS SPACE

FEBRUARY 2, 2,004

				IIN	INIS SPACE
 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered A				required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees	U00000040884 02/03/04-80065-019 150.00
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC TORO, ALVARO 4001 N OCEAN BLVD #401B BOCA RATON, FL 33431				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TORO, MARI A 4001 N OCEAN BLVD #401B BOCA RATON, FL 33431				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TORO, MARIA E 4001 N OCEAN BLVD #401B BOCA RATON, FL 33431			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling 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 eath; 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.					

LVARV

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR