## 2005 FOR PROFIT.CORPORATION ANNUAL REPORT

SIGNATURE:

## May 02, 2005 08:00 AM Secretary of State DOCUMENT # G02367 1. Entity Name VILLA ONI, INC. Mailing Address Principal Place of Business -3030 S.W. 95TH COURT 3030 S.W. 95TH COURT MIAMI, FL 33165 MIAMI, FL 33165 CR2E034 (10/03) 04292005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2243460 Not Applicable \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE NIETO, JULIO 3030 S.W. 95TH COURT MIAMI, FL 33165 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 Signature. typed of printed name of registered agent and life it applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PSD TITLE RAMOS, ONILIA NAME 3030 S.W. 95TH COURT STREET ADDRESS CITY-ST-ZIP MIAMI, FL TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS C(TY-ST-Z)P TITLE NAME STREET ADDRESS CITY-ST-7IP 12. I hereby certify that the information supplied with this filting 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 his 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 life empowered.

FILED