## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G16290

Title:

Name:

Address:

City-St-Zip:

( ) Delete

ROMEY, PATRICK

MIAMI, FL 33183

6126 SW 127 PLACE

FILED Aug 16, 2004 Secretary of State

Entity Nam	e: ALBERTO	ROMEU STUDIO, INC.		•	
Current Principal Place of Business:			New Principal Place	of Business:	
1890 SW 57 MIAMI, FL 3	7TH AVE., SUIT 33155	ΓE 107			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1890 SW 57 MIAMI, FL 3	7TH AVE., SUIT 33155	ΓΕ 107			
FEI Number:	59-2240541	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ROMEU, ALBERTO 1890 SW 57TH AVE., SUITE 107 MIAMI, FL 33155 US					
The above in the State		bmits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR					
		Signature of Registered Ager	nt	Date	
Election Cam	paign Financing <sup>*</sup>	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () E ROMEU, ALBERT 6126 SW 127TH MIAMI, FL 33183	PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () E ROMEU, CRISTIN 6126 SW 127TH MIAMI, FL 33183	PLACE	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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ALBERTO ROMEU PD 08/16/2004

(X) Change ( ) Addition

ROMEU, PATRICIA 6126 SW 127 PLACE

MIAMI, FL 33183