

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G38540

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: VISTA MAR MANAGEMENT, INC.

## Current Principal Place of Business:

3370 NE 190TH ST  
SUITE 604  
AVENTURA, FL 33180

## New Principal Place of Business:

## Current Mailing Address:

3370 NE 190TH ST  
SUITE 604  
AVENTURA, FL 33180

## New Mailing Address:

FEI Number: 65-0478420      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SKLAR, LEONARD E.  
3370 NE 190TH ST  
SUITE 604  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

SKLAR, LEONARD E  
3370 NE 190TH ST  
SUITE 604  
AVENTURA, FL 33180 US

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.

SIGNATURE: LEONARD E. SKLAR

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SKLAR, LEONARD E.,  
Address: 3370 NE 190TH ST #604  
City-St-Zip: ADVENTURA, FL 33180

Title: V ( ) Delete  
Name: SKLAR, WILLIAM P  
Address: 7238 MONTRICO DR.  
City-St-Zip: BOCA RATON, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SKLAR, LEONARD E  
Address: 3370 NE 190TH ST #604  
City-St-Zip: ADVENTURA, FL 33180

Title: V (X) Change ( ) Addition  
Name: SKLAR, WILLIAM P  
Address: 7238 MONTRICO DR.  
City-St-Zip: BOCA RATON, FL 33433

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.

SIGNATURE: LEONARD E. SKLAR

PD

01/06/2005

Electronic Signature of Signing Officer or Director

Date