## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G89280

**Entity Name: FIJER CORPORATION** 

**FILED** Feb 13, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

7053 S. W. 47 ST. 6767 COLLINS AVENUE - SUITE 1010

P O. BOX 55-7925 MIAMI BEACH, FL 33141 MIAMI, FL 33155

**Current Mailing Address: New Mailing Address:** 

7053 S. W. 47 ST 6767 COLLINS AVENUE - SUITE 1010

P O. BOX 55-7925 MIAMI BEACH, FL 33141 MIAMI, FL 33155

FEI Number: 59-2395344 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

ALVAREZ, BENEDICTO F ALVAREZ, BENEDICTO F P

6767 COLLINS AVE APARTMENT 1010 6767 COLLINS AVENUE - APT.1010 MIAMI, FL 33141 US MIAMI BEACH, FL 33141

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: BENEDICTO F. ALVAREZ 02/13/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

MIAMI, FL 33155

City-St-Zip:

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MIAMI, FL 33176

City-St-Zip:

Title: (X) Change ( ) Addition DPTM ( ) Delete Title: ALVAREZ, BENEDICTO F DPTM Name: ALVAREZ, BENEDICTO,, F Name: 6767 COLLINS AVE APT 1010 6767 COLLINS AVE APT 1010 Address: Address:

City-St-Zip: MIAMI BEACH, FL City-St-Zip: MIAMI BEACH, FL 33141 US

SV Title: sv (X) Change ( ) Addition Title: () Delete Name: BELEN ALVAREZ, MARIA Name: ALVAREZ, MARIA B SV 3439 SW 65TH AVE. 9744 S. W. 126 TERR. Address: Address:

Title: Title: (X) Change ( ) Addition () Delete

ISABEL ALVAREZ, MARIA ALVAREZ, MARIA I V Name: Name: 3439 SW 65 AVE 9744 S. W. 126 TERR. Address: Address: City-St-Zip: MIAMI, FL 33155 City-St-Zip: MIAMI, FL 33176

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.

Ρ SIGNATURE: BENEDICTO F. ALVAREZ 02/13/2005