2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H83729

Entity Name: CAISA CORPORATION

FILED May 10, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2000 BANKS ROAD 207

MARGATE, FL 33063 US

New Mailing Address: Current Mailing Address:

2000 BANKS RD, STE 207 MARGATE, FL 33063 US

FEI Number: 59-2649613 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:

ROMAGOSA, GEORGE E. ROMAGOSA, GEORGE E. 20252 HACIENDA CT 2000 BANKS ROAD BOCA RATON, FL 33498 US SUITE 207 MARGATE, FL 33063 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: GEORGE ROMAGOSA 05/10/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition PATRICIA ROMAGOSA, Name: Name: PATRICIA ROMAGOSA,

20252 HACIENDA CT 2000 BANKS ROAD, SUIT E 207 Address: Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: MARGATE, FL 33063

Title: (X) Delete Title: () Change () Addition Name: POSTAL, ELENA Name: PO BOX 16183 NA Address: Address: W PALM BCH, FL 33416 City-St-Zip:

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

HAUGE, AMY Name: Name: 5240 SW 5TH ST Address: Address: City-St-Zip: MARGATE, FL 33068 City-St-Zip:

Title: DPS () Delete Title: DPS (X) Change () Addition ROMAGOSA, GEORGE ROMAGOSA, GEORGE Name: Name: Address: 20252 HACIENDA CT Address: 2000 BANKS ROAD, SUITE 207 City-St-Zip: City-St-Zip: BOCA RATON, FL 33498 MARGATE, FL 33063

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: GEORGE ROMAGOSA PDS 05/10/2005