

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H88001

FILED  
Mar 19, 2004  
Secretary of State

Entity Name: PRADO MANAGEMENT, INC.

## Current Principal Place of Business:

3910 NORTHDAL BLVD  
STE 100  
TAMPA, FL 33624

## New Principal Place of Business:

3820 NORTHDAL BLVD  
STE 107A  
TAMPA, FL 33624

## Current Mailing Address:

3910 NORTHDAL BLVD  
STE 100  
TAMPA, FL 33624

## New Mailing Address:

3820 NORTHDAL BLVD  
STE 107A  
TAMPA, FL 33624

FEI Number: 59-2899959

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLS, FREDERICK J.  
C/O MORRISON, MORRISON & MILLS, P.A.  
1200 W. PLATT ST, STE 100  
TAMPA, FL 33606

## Name and Address of New Registered Agent:

MILLS, FREDERICK J.  
C/O MORRISON & MILLS, P.A.  
1200 W. PLATT ST, STE 100  
TAMPA, FL 33606

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:

03/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SD ( ) Delete  
Name: HERRERA, DAMARIK,  
Address: 15204 ALEXIS DRIVE  
City-St-Zip: TAMPA, FL

Title: PD ( ) Delete  
Name: PRADO, JUAN C  
Address: 6625 VAN DYKE RD  
City-St-Zip: LUTZ, FL 33549

Title: VPD ( ) Delete  
Name: PRADO, JENIFER Z  
Address: 6625 VAN DYKE RD  
City-St-Zip: LUTZ, FL 33549

Title: VPD ( ) Delete  
Name: DEL CUETO, JUAN  
Address: 15129 SPRINGVIEW ST  
City-St-Zip: TAMPA, FL 33624

Title: TD ( ) Delete  
Name: ROMER, JOHN A III  
Address: 7033 PELICAN ISLAND DRIVE  
City-St-Zip: TAMPA, FL 33634

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: A. JOHN ROMER, III

TD

03/19/2004

Electronic Signature of Signing Officer or Director

Date