

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H93020

Entity Name: ATUVI, INC.

FILED
Mar 26, 2004
Secretary of State

Current Principal Place of Business:

DEPT. 1646
1601 NW 97TH AVE., UNIT C101
MIAMI, FL 33172

New Principal Place of Business:

1601 NW 97TH AVE.
DEPT. 1646
MIAMI, FL 33102

Current Mailing Address:

DEPT. 1646
P.O. BOX 025216
MIAMI, FL 33102 US

New Mailing Address:

DEPT. 1646 SJO
P.O. BOX 025216
MIAMI, FL 33102 US

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

Name and Address of Current Registered Agent:

INTELMAR U.S.A., INC.
7559 N.W. 70 STREET
ATTN: LEONEL M. BARRIOS
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: PHELPS, WILLIAM J
Address: 1539 HARRISON
City-St-Zip: HOLLYWOOD, FL

Title: V () Delete
Name: PERALTA, MANUEL E
Address: APARTADO 2727
City-St-Zip: SAN JOSE, COSTA RICA,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MANUEL E. PERALTA

VP

03/26/2004

Electronic Signature of Signing Officer or Director

Date