2005 FOR PROFIT CORPORATION ANNUAL REPORT

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Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90113 022 ***150.00

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02242005 Chg-P CR2E034 (10/03)

DOCUMENT # K19780

1. Entity Name
HIDE INVESTMENT CORPORATION

Principal Place of Business	Mailing Address
% LUIS MEDERO 230 W. SAN MARINO DR MIAMI BCH, FL 33139-1149	% LUIS MEDERO 230 W. SAN MARINO DR MIAMI BCH, FL 33139-1149

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2179299 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MEDERO, LUIS 230 W. SN MARINO DR MIAMI BCH, FL 33139	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE DP ☐ Delete NAME MEDERO, LUIS STREET ADDRESS 230 W. SAN MARINO DR CITY-ST-ZIP MIAMI BCH, FL		TITLE D ☐ Change ☒ Addition NAME Gomez, Miriam STREET ADDRESS 230 W. San Marino Dr. CITY-ST-ZIP Miami Bch, FL 33139	
TITLE ~~DS~~ ☐ Delete NAME MARTINEZ, GLORIA STREET ADDRESS ~~230 W. SAN MARINO DR~~ CITY-ST-ZIP ~~MIAMI BCH, FL~~		TITLE D ☒ Change ☐ Addition NAME Martinez Gloria STREET ADDRESS 2328 SW 18 St CITY-ST-ZIP Miami, Fl 33145	
TITLE D ☐ Delete NAME MEDERO, LUIS STREET ADDRESS ~~2468 SW 18 STREET~~ CITY-ST-ZIP ~~MIAMI, FL 33145~~		TITLE D ☒ Change ☐ Addition NAME Medero, Luis STREET ADDRESS 4615 SW 8CT Apt #3 CITY-ST-ZIP Cape Coral, Fl 33914	
TITLE D ☐ Delete NAME MEDERO, GLADYS STREET ADDRESS ~~13322 SW 6 STREET~~ CITY-ST-ZIP MIAMI, FL 33184		TITLE D ☒ Change ☐ Addition NAME Medero, Gladys STREET ADDRESS 8830 SW 72nd Street B-112 CITY-ST-ZIP Miami, Fl 33173	
TITLE D ☐ Delete NAME YESENIA, MEDERO STREET ADDRESS ~~2468 SW 18 ST~~ CITY-ST-ZIP ~~MIAMI, FL 33145~~		TITLE D ☒ Change ☐ Addition NAME Medero, Yesenia STREET ADDRESS 2476 SW 18 St CITY-ST-ZIP Miami, Fl 33145	
TITLE D ☐ Delete NAME MEDERO, JANET STREET ADDRESS 13322 SW 6 STREET CITY-ST-ZIP MIAMI, FL 33184		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: (V) _____ 2/23/05 305 858-8643
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #