

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K21103

FILED  
Jan 21, 2004  
Secretary of State

**Entity Name:** PONTES & ASSOCIATES REALTY, INC.

**Current Principal Place of Business:**

% CHERIE DONNETTA PONTES  
2301 SW 92 PLACE  
MIAMI, FL 33165

**New Principal Place of Business:**

% CHERIE DONNETTA PONTES  
5880 SW 97 STREET  
MIAMI, FL 33157

**Current Mailing Address:**

C/O CHERIE DONNETTA PONTES  
P.O. BOX 831898  
MIAMI, FL 33283

**New Mailing Address:**

**FEI Number:** 65-0044835      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

PONTES, CHERIE DONNETTA  
2301 SW 92 PLACE  
MIAMI, FL 33165      US

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

PONTES, CHERIE DONNETTA  
5880 SW 97 STREET  
MIAMI, FL 33157      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: CHERIE D PONTES

01/21/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: PONTES, CHERIE DONNE, TTA  
Address: 2301 SW 92 PLACE  
City-St-Zip: MIAMI, FL

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

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: CHERIE D PONTES

D

01/21/2004

Electronic Signature of Signing Officer or Director

Date