

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K46359

FILED  
Apr 22, 2005  
Secretary of State

Entity Name: THE COPA COLLECTION, INC.

## Current Principal Place of Business:

13065 SW 133CT  
MIAMI, FL 33186 US

## New Principal Place of Business:

2901 SOUTH BAYSHORE DRIVE  
2-B  
MIAMI, FL 33133 US

## Current Mailing Address:

13065 SW 133 CT  
MIAMI, FL 33186 US

## New Mailing Address:

2901 SOUTH BAYSHORE DRIVE  
2-B  
MIAMI, FL 33133 US

FEI Number: 65-0085412

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HACKER, BARBARA  
13065 SW 133 CT  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

HACKER, BARBARA  
2901 SOUTH BAYSHORE DRIVE  
2-B  
MIAMI, FL 33133 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:

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: HACKER, BARBARA  
Address: 2901 S. BAYSHORE DR.  
City-St-Zip: MIAMI, FL 33133

Title: DST ( ) Delete  
Name: SMITH, HENRY J B  
Address: 2901 S BAY SHORE DR  
City-St-Zip: MIAMI, FL 33133

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HACKER, BARBARA  
Address: 2901 S. BAYSHORE DR. 2-B  
City-St-Zip: MIAMI, FL 33133

Title: DST (X) Change ( ) Addition  
Name: SMITH, HENRY J B  
Address: 2901 S BAY SHORE DR 2-B  
City-St-Zip: MIAMI, FL 33133

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: HENRY J. B. SMITH

DST

04/22/2005

Electronic Signature of Signing Officer or Director

Date