


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90181 036 ***150.00

DOCUMENT # K85577		
1. Entity Name GERMAN PENA, P.A.		

Principal Place of Business 9010 SW 137TH AVE #219 STE 113 MIAMI, FL 33186 US	Mailing Address 9010 SW 137TH AVE #219 STE 113 MIAMI, FL 33186 US
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2. Principal Place of Business 9010 SW 137th Ave.	3. Mailing Address 9010 SW 137th Ave.
Suite, Apt. #, etc. Suite 113	Suite, Apt. #, etc. Suite 113
City & State Miami, FL.	City & State Miami, FL.
Zip 33186	Country U.S.A.

04222005 Chg-P CR2E034 (10/03)



4. FEI Number 65-0130201		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent PENA, GERMAN 9010 SW 137TH AVE #219 STE 113 MIAMI, FL 33186		
7. Name and Address of New Registered Agent 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: <i>German Pena</i> (NOTE: Registered Agent signature required when revalidating) DATE: 4/25/05		

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PENA, GERMAN 9010 SW 137TH AVE STE 113 MIAMI, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <i>German Pena</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE: 4/25/05 DAYTIME PHONE: 305 387 0014