


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L54040

1. Entity Name
 ALDEMA MIAMI BEACH INVESTMENT CORPORATION



Principal Place of Business 200 S BISCAYNE BLVD 6TH FLOOR MIAMI, FL 33131 US	Mailing Address 200 S BISCAYNE BLVD 6TH FLOOR MIAMI, FL 33131 US
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DO NOT WRITE IN THIS SPACE



02082005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0176009	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTIN, FRANCISCO J CPA
 200 S BISCAYNE BLVD
 6TH FLOOR
 MIAMI, FL 33131

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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 _____ (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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DELLER, ALBERTO CASILLA 2036 QUITO, ECUADOR.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DELLER, FRIDA CASILLA 2036 QUITO, ECUADOR.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DELLER, MICHEL CASILLA 2036 QUITO ECUADOR.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DELLER, HELEN CASILLA 2036 QUITO, ECUADOR.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/02/05-80051-008 150.00

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: _____ Date: 2/21/05 Daytime Phone #: 011 59 399908689