## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Principal Piaco of Dusiness 1366 SW 15 LANE 26 Country 26 Country 26 Country 26 Country 26 Country 26 Country 27 Name and Address of Status Desired 27 Name and Address of New Registered Agent 27 Name and Address of New Registered Agent 28 Nov 15 LANE 13165 SW 15 LANE 13165	1. Entity Nan	# L78663			08:00 A State		1						
1316S SW 15 LANE MAM FL 33184  1316S SW 15 LANE MAM FL 33184  2. Principal Pisce of Business  Sule, Apt. #, etc.  MOCHE CR2634 (11/33)  Application  Applicat	Principal Plac	ce of Busines	s	Mailin	n Address			1					
2. Principal Place of Business	13165 SW 1	15 LANE	•		-								
Subst. Apl. #. etc	MIAMI FL 3	3184		MAN	#I FL 33184								
Subst. Apl. #. etc													
City & State  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  State  State Desirate	2. Principal F	Place of Busin	ness	3. Mai	ling Address								
State   Country   Zip   Country   Zip   Country   St. Certificate of Status Desired   St. St. 45 Additional Fee Required   St. Certificate of Status Desired   St. 75 Additional Fee Required   St.	Suite, Apt.	. #, etc		Suit	Suite, Apt. #, etc.			-	MOORE	CR2E03	34 (11/03)		
Since Address of Current Registered Agent  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  N	City & Stat	te		City	City & State			<b>4.</b> F	FEI Number <b>65-02138</b>	50		<del></del>	
Sinker and Address of Current Registered Agent   Name	Zip		Country	Zip		itry	5. (	Certificate of Status Desired		\$8.75 A	Additio	· · · · · · · · · · · · · · · · · · ·	
RIVERO, CONCHITA 13165 SW 15 LANE MIAMI FL 33184  Sirent Address (P.O. Box Number is Not Acceptable)  Sirent Address (P.O. Box Number is Number is Not Acceptable)  Sirent Address (P.O. Box Number is Not Acceptable)  Sirent Address (P.O. Box Number is		6. Name	and Address of	Current Registere	ed Agent		7. 1	Name and Address of Nev	Registere	<u>`</u>	rea		
Sireer Address (P10, Box Number is Not Acceptable)    Sireer Address (P10, Box Number is Not Acceptable)							Name			· · · · · · · · · · · · · · · · · · ·			
E. The above named entity automate this statement for the purpose of changing is registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent.    SIGNATURE	13165 SW 15 LANE						Street Address (P.O. Box Number is Not Acceptable)						
R. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florada. Lam familiar with, and accept the obligations of registered agent.    Signature   Signatu	IAII	WII 1 E 30	107										
SIGNATURE    Signature   Proceedings of registered agent   Proceedings   Procedings							City			F	L Zip Co	ode	
SIGNATURE    Signature Injected printed name of regulatored agont and this if applicable.   NOTE Regulatored Apart Reginature received when re	8. The above	named entit	y submits this state	ement for the purp	ose of changing its	register	ed office or register	ed ag	ent, or both, in the State of	Florida, la	m familiar wit	th, and	d accept
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$55.00 May Be Added to Feese  OFFICERS AND DIRECTORS  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  PRIVERO, CONCHITA RIVERO, CONCHITA STREET ADDRESS CITY SI-2P  TITLE MAME STREET ADDRESS CITY SI-2P  TITLE MAM	the obligation	tions of regist	tereo agent.										
FILE NOW!!! FEE IS \$150.00 Alter May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  INTERPORT CONCHITA SIRRET ADDRESS CITY 51.2P  INTERPORT CONCRESS CITY 51.2	SIGNATURE	Signature typed	or ortified name of renyst	nne k alfi the innne bare	dirable (NOT	T Banstara	d åned signature ragures	i ubon ra	Contetanic	riame.			
Atter May 1, 2004 Fee will be \$55.0.0 May be Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  DP RIVERO, CONCHITA  SIRVERO, CONCHITA  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  17. ADDITIONS/CHANGES	**		<del></del>	<del> </del>		E. Hogiston	a water signature required	T WOOD TE	3	Unic		<u>.                                    </u>	
TITLE NAME SITERT ADDRESS CITY -ST-ZIP TITLE NAME STREET	After May 1, 2004 Fee will be \$550.00								, -	_			
NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST	10.		OFFICE	RS AND DIRECTO	RS	11.		AD	DITIONS/CHANGES TO C	FFICERS A	VD DIRECTO	RS IN	111
TITLE NAME STREET ADDRESS CITY -ST-2P TITLE STREET ADDRESS CITY -ST-2P TITL		£	CALCUITA		☐ Defete	3	}						Addition
TITLE NAME STREET ADDRESS CITY -ST-2P TITLE STREET ADDRESS CITY -ST-2P TITL		<b>,</b> -					}		00000005753 N3/11/N4-AAAAA 15 150 00				
NAME STREET ADDRESS CITY- ST- ZP  TITLE NAME S	CITY-ST-ZIP	MIAMI FL:	33184			CHTY	- ST - ZIP		0.0/11/04-	JUUDU-(	JIO 100,	·W	
STREET ADDRESS CITY-ST-ZIP  TITLE CITY-ST-ZIP CITY-ST-ZIP  TITLE CITY-ST-ZIP CITY-ST-ZIP  TITLE CITY-ST-ZIP C					☐ Delete	3	ļ				Changr	e [	Addition
CITY-ST-ZIP  ITILE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS C							- 1						
NAME STREET ADDRESS CITY - ST - ZIP  TITLE NAME STREET ADDRESS CITY - ST - ZIP  TITLE NAME STREET ADDRESS CITY - ST - ZIP  TITLE NAME STREET ADDRESS CITY - ST - ZIP  TITLE NAME NAME STREET ADDRESS CITY - ST - ZIP  TITLE NAME STREET ADDRESS						Æ	i i						
STREET ADDRESS CITY-ST-ZIP  TITLE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE OPERED TIT	TITLE				☐ Delete	าถน				<del></del>	Changi	e [	Addition
CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE						•	}						
NAME STREET ADDRESS CITY-ST-ZIP  TIRE Delete NAME STREET ADDRESS CITY-ST-ZIP  TIRE NAME STREET ADDRESS CITY-ST-ZIP  TIRE NAME STREET ADDRESS CITY-ST-ZIP  TIRE Delete TIRE STREET ADDRESS CITY-ST-ZIP  TIRE Delete TIRE STREET ADDRESS CITY-ST-ZIP  TIRE Delete TIRE STREET ADDRESS CITY-ST-ZIP  TIRE STREET ADDRESS CITY-ST-ZIP  TIRE STREET ADDRESS CITY-ST-ZIP  TREET ADDRESS CIT						Ł	<b>}</b>						
STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CIT	TITLE	İ	······································		☐ Defele	TETLE	Ē	-		<del> </del>	☐ Change	e [	Addition
CITY-ST-ZIP  TIRLE Delete TIRLE NAME STREET ADDRESS CITY-ST-ZIP  TIRLE Delete TIRLE NAME STREET ADDRESS CITY-ST-ZIP TIRLE Delete Delete TIRLE Delete Del												_	_
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP T						•	l						
NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRES					□ Dalata						Channe		1 Addition
CITY-ST-ZIP  TITLE  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 are same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted 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 but at like empowered					L. Delete	E	!				□3 cuenta	; <u>L</u>	
INTLE    Delete   INTLE   Delete   INTLE   Delete   INTLE   Delete   INTLE   Delete							<b>I</b>						
NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP 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 trusted 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				-		-			·				
STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  12. I hereby certify that the information supplied with this filling 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 reperied or trusted 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					L_I Delete		Į.				L Change	; <u>L</u>	Addition
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 trusted 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						•	i						
					*****								
	12. I hereby a indicated	certify that the	e information supp rt or supplemental	lied with this filing report is true and	does not qualify fo	the exe	mption stated in Seture shall have the	ction same !	119.07(3)(i), Florida Statute legal effect as if made und	s. I further our oath: that	ertify that the	e infor	mation director
	of the cor changed	rporation or the , or on an atta	ne receiver or trust achment with an ac	er empowered to diress, with all or						me appear	sin Block 10	or Bk	ock 11 if

KONCHITA RIVERD J-8-04

**FILED**