

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M14956

FILED
Mar 07, 2005
Secretary of State

Entity Name: AVILA INVESTMENTS AND INSURANCE CORPORATION

Current Principal Place of Business:

5901 SW 74TH STREET
SUITE 302
MIAMI, FL 33143 US

New Principal Place of Business:

Current Mailing Address:

5901 SW 74TH STREET
SUITE 302
MIAMI, FL 33143 US

New Mailing Address:

FEI Number: 59-2544824 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARTIN-LAVIELLE, ANA
901 PONCE DE LEON BLVD.
SUITE 502
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AVILA, LEON R.,
Address: 8919 SW 150 N CRT CIR
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: AVILA, LEON R.,
Address: 8220 SW 62ND AVENUE
City-St-Zip: MIAMI, FL 33143

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: LEON R. AVILA

PRES

03/07/2005

Electronic Signature of Signing Officer or Director

_____ Date