


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2005 08:00 AM
Secretary of State

DOCUMENT # M27442 1. Entity Name LA NUEVA ESTRELLA INC.	
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Principal Place of Business 553 E 9TH ST HIALEAH, FL 33010 US	Mailing Address 553 E 9TH ST HIALEAH, FL 33010 US
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DO NOT WRITE IN THIS SPACE



01212005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2677869	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SOLER, ROBERTO 736 S.E. 8TH PLACE HIALEAH, FL 33010

**DO NOT WRITE
IN THIS SPACE**

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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST SOLER, ROBERTO 736 SE 8TH PL HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SANCHEZ, OLGA 496 NW 35 AVE MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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IN THIS SPACE**

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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ROBERTO SOLER	Date 2/28/05	Daytime Phone # 305-883-1696
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