2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2004
Secretary of State

DOCUMENT# M32772

Entity Name: SEQUEIRA & GAVARRETE, P.A.

Current Principal Place of Business:

811 PONCE DE LEON BLVD
STE 200
CORAL GABLES, FL 33134 US

New Principal Place of Business:

811 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 US

Current Mailing Address:

811 PONCE DE LEON BLVD
STE 200
CORAL GABLES, FL 33134 US

New Mailing Address:

811 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 US

FEI Number: 59-2756059 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SEQUEIRA, ROBERTO
811 PONCE DE LEON BLVD
STE 200
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SEQUEIRA, ROBERTO
811 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 US

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: ROBERTO SEQUEIRA 02/20/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: SEQUEIRA, ROBERTO,
Address: 811 PONCE DE LEON BLVD, STE 200
City-St-Zip: CORAL GABLES, FL 33134

Title: VSD ( ) Delete
Name: GAVARRETE, FERNANDO,
Address: 811 PONCE DE LEON BLVD, STE 200
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: SEQUEIRA, ROBERTO,
Address: 811 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: VSD (X) Change ( ) Addition
Name: GAVARRETE, FERNANDO,
Address: 811 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

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: ROBERTO SEQUEIRA PTD 02/20/2004
Electronic Signature of Signing Officer or Director Date