


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90020 008 ***150.00

DOCUMENT # M39716 1. Entity Name PEDRO BELTRAN-ROJAS, INC.	
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Principal Place of Business 13641 ROANOKE STREET DAVIE FL 33325 US NEW ADDRESS.	Mailing Address C/O PEDRO E BELTRAN 13641 ROANOKE STREET DAVIE FL 33325 US
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2. Principal Place of Business 14944 SW 33rd Street Suite, Apt. #, etc.	3. Mailing Address 14944 SW 33rd Street Suite, Apt. #, etc.
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City & State Davie, FL 33331	City & State Davie, FL 33331
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Zip Country US	Zip Country US
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4. FEI Number 59-2746040	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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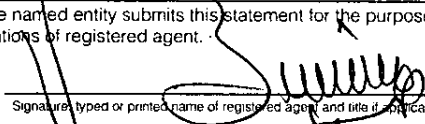


MOORE CR2E034 (11/03)

6. Name and Address of Current Registered Agent BELTRAN, PEDRO 13641 ROANOKE STREET FORT LAUDERDALE FL 33325	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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  DATE **02-07-04**

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! - FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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	P BELTRAN, PEDRO <input type="checkbox"/> Delete 930 WASHINGTON AVE. 2ND FLOOR MIAMI BCH. FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS FERNANDEZ, MERCEDES <input type="checkbox"/> Delete 13641 ROANOKE STREET DAVIE FL 33325
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BELTRAN, PEDRO E. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14944 SW 33rd Street Davie, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS FERNANDEZ, MERCEDES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14944 SW 33rd Street Davie, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 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 **02-07-04** DAYTIME PHONE # **(954) 423-1679**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment
Doc # M39716

PEDRO BELTRAN ROJAS, INC.

54004993

NEW ADDRESS

**Starting on February 16, 2004
14944 SW 33rd street
Davie, Fl 33331**

Phone-Fax (954)423-1679