


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # M40110

1. Entity Name
OWEN INTERNATIONAL, INC.



Principal Place of Business Mailing Address

**500 W. 83RD STREET
HIALEAH, FL 33014** **500 W. 83RD STREET
HIALEAH, FL 33014**



04292004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2741246 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BAZAN, OWEN ZAYAS
500 W. 83RD STREET
HIALEAH, FL 33014**

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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 _____

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**


10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	P ZAYAS-BAZAN, OWEN 662 GLENRIDGE RD. KEY BISCAYNE, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	ST ZAYAS-BAZAN, MARIA 662 GLENRIDGE RD. KEY BISCAYNE, FL
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05/03/04-80130-005 150.00

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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 persons empowered

SIGNATURE:  _____ Date: April 29 / 04 Signature Printed Name

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR