2005 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 30, 2005 08:00 AM DOCUMENT # M43459 Secretary of State 1. Entity Name ORMA & SONS, INC. Mailing Address Principal Place of Business **601 BICKELL KEY DR 601 BICKELL KEY DR** SUITE 201 SUITE 201 MIAMI, \widetilde{FL} 33131 MIAMI, FL 33131 01042005 No Cho-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2749987 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent GUTIERREZ, RENALDY DO NOT WRITE 601 BRICKELL KEY DR., #201 MIAMI, FL 33131 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 Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME ALCIVAR, ORLANDO STREET ADDRESS 1901 BRICKELL AVE., APT.1008 CITY-ST-ZIP MIAMI, FL 33129 TITLE U00000281007 03/30/05-80041-024 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP NAME STREET ADDRESS CITY-ST-ZIP m F NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the Information supplied with this filin indicated on this report or supplemental report is true and of the corporation or the receiver or trustee empowered to changed, or on an attachment with an address with all of the corporation. does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if ner like empowered. FEB:16,05 FORLANDOALCIVAR SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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