

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M57268

Entity Name: VAR ENTERPRISE INC.

FILED
Apr 13, 2004
Secretary of State

Current Principal Place of Business:

7890 N.W. 29TH STREET
MIAMI, FL 33122

New Principal Place of Business:

8900 S.W. 104TH STREET
MIAMI, FL 33176

Current Mailing Address:

7890 N.W. 29TH STREET
MIAMI, FL 33122

New Mailing Address:

8900 S.W. 104TH STREET
MIAMI, FL 33176

FEI Number: 59-2442388

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, MARIA L.
7890 N.W. 29TH STREET
MIAMI, FL 33122

Name and Address of New Registered Agent:

GARCIA, MARIA L.
8900 S.W. 104 TH STREET
MIAMI, FL 33176

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: MARIA L. GARCIA

04/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GARCIA, MARIA L.,
Address: 7890 N.W. 29TH STREET
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARCIA, MARIA L.,
Address: 8900 S.W. 104TH STREET
City-St-Zip: MIAMI, FL 33176

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: MARIA L. GARCIA

P

04/13/2004

Electronic Signature of Signing Officer or Director

Date