


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 08, 2004 8:00 am
Secretary of State

07-08-2004 90187 038 ***150.00

DOCUMENT # M95714 1. Entity Name CID CATEURA, S. DE R.L., INC.	
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Principal Place of Business 3964 N.W. 57TH AVE. VIRGINIA GARDENS, FL 33166	Mailing Address 3964 N.W. 57TH AVE. VIRGINIA GARDENS, FL 33166
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DO NOT WRITE IN THIS SPACE

06302004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0200509	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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6. Name and Address of Current Registered Agent CID, ALFONSO 3964 NW 57TH AVE VIRGINIA GARDENS, FL 33166

**DO NOT WRITE
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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	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	PSD CID, ALFONSO 3964 NW 57TH AVE VIRGINIA GARDENS, FL 33166
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**DO NOT WRITE
IN THIS SPACE**

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: *x Alfonso Cid*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment
#M95714
44047463

June 30, 2004

Uniform Business Report
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: CID CATEURA S. DE. R.L INC.
Doc. M95714

To Whom It May Concern:

This letter is in regards to the corporation annual report for the 2004 filing year. According to your received an annual report for our corporation. We are sending a filled out blank report to your department because we never received the original report. Please accept our apologies and accept this \$150.00 filing fee. We never meant to send the report late, if we would have received the report, we would have sent it on time. We apologize any inconvenience this may have caused.

If you have any questions please feel free to contact me at (305) 541-3980.

Sincerely,

Alfonso Cid
President