2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

5/3

FILED
May 28, 2004 8:00 am
Secretary of State
05-03-2004 90739 027 ****61.25

DOCUMENT # N03000006543

1. Entity Name

COLUSANA, INC.

Principal Place of Business	Mailing Address
520 BRICKELL KEY DRIVE A1113 MIAMI FL 33131 US	520 BRICKELL KEY DRIVE A1113 MIAMI FL 33131 US

MOORE CR2E037 (11/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 83-0368358 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ORTIZ, ALVARO H 520 BRICKELL KEY DRIVE A1113 MIAMI FL 33131	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

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

FILE NOW: FEE IS $61.25
Due By May 1, 2004

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ORTIZ, ALVARO H 520 BRICKELL KEY DRIVE, APT A1113 MIAMI FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ADATTO, EMILIO 8452 N.W. 61ST STREET MIAMI FL 33166	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Gabriel Cardona Galvis 520 Brickell Key Dr. #1113 Miami FL 33131 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP RAMIREZ, FREDDY 8452 N.W. 61ST STREET MIAMI FL 33166	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Cortez, Orlando Ryderra 14810 S.W. 80 St. Mia, FL 33193 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PAZ, MARINO 14810 S.W. 80TH STREET MIAMI FL 33193	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Helmut Levy 1800 Columbus Blvd Coral Gables, Fla 33134 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S UMANA, CLARA 10640 S.W. 96TH STREET MIAMI FL 33176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ORTIZ, MYRIAM 520 BRICKELL KEY DRIVE, APT A1113 MIAMI FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ 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 617, 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: A.H. Ortiz 4-28-04 (305) 377-0308

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #