

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

DOCUMENT # N03000007794

1. Entity Name

PENA MARTIANA INC.



Principal Place of Business
103 MIRACLE MILE
CORAL GABLES FL 33134

Mailing Address

103 MIRACLE MILE
CORAL GABLES FL 33134

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

56-2473640

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

QUERALTO, JUAN
[REDACTED]
[REDACTED]

Name

Street Address (P.O. Box Number is Not Acceptable)

13741 S.W. 74th ST.

City

FL 33183

7. Name and Address of New Registered Agent

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 \$61.25
Due By May 1, 2005

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME QUERALTO, JUAN
STREET ADDRESS 103 MIRACLE MILE
CITY-ST-ZIP CORAL GABLES FL 33134

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

13741 S.W. 74th ST.
MIAMI, FL 33183

TITLE VD
NAME BOBER, JOSE
STREET ADDRESS 103 MIRACLE MILE
CITY-ST-ZIP CORAL GABLES FL 33134

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

13741 S.W. 74th ST.
MIAMI, FL 33183

TITLE STD
NAME QUERALTO, JUAN JR.
STREET ADDRESS 103 MIRACLE MILE
CITY-ST-ZIP CORAL GABLES FL 33134

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

13741 S.W. 74th ST.
MIAMI, FL 33183

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Juan Queralto*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3 23-5 205595 83.03

Date

Daytime Phone #