

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003351

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: CONCIERTOS INTERNACIONALES INC.

## Current Principal Place of Business:

164 SPARROW DR.  
104  
ROYAL PALM BEACH, FL 33411

## Current Mailing Address:

164 SPARROW DR.  
104  
ROYAL PALM BEACH, FL 33411

## New Principal Place of Business:

544 SHADDY PINE WAY  
D  
GREENACRES, FL 33415

## New Mailing Address:

544 SHADDY PINE WAY  
D  
GREENACRES, FL 33415

FEI Number: 06-2023901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAMIREZ, BLAS  
164 SPARROW DR.  
104  
ROYAL PALM BEACH, FL 33411 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RAMIREZ, BLAS  
Address: 164 SPARROW DR. SUITE 104  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: V ( ) Delete  
Name: CARDENAS, MARTHA  
Address: 13825 S.W. 88 ST. # 136  
City-St-Zip: MIAMI, FL 33186

Title: S (X) Delete  
Name: EVANS, PATRICIA  
Address: 1286 THE POINTE DR.  
City-St-Zip: WEST PALM BEACH, FL 33409

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: CARRASCO, FARES N  
Address: 544 SHADDY PINE WAY #D  
City-St-Zip: GREENACRES, FL 33415

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BLAS RAMIREZ

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date