2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400005015

City-St-Zip: MIAMI, FL 33172

Entity Name: CAP. DR. JORGE "TITO" MATOS-POSTIGO INC.

FILED Sep 01, 2005 Secretary of State

Littly Nai	HE. CAP. DR. JORGE THO MATO	
Current Principal Place of Business:		New Principal Place of Business:
10590 NW 7TH TERR MIAMI, FL 33172		PO BOX 835191 MIAMI, FL 33283
Current Mailing Address:		New Mailing Address:
10590 NW MIAMI, FL	7TH TERR 33172	PO BOX 835191 MIAMI, FL 33283
FEI Number:	FEI Number Applied For ce with s. 607.193(2)(b), F.S., the corporation	() FEI Number Not Applicable (X) Certificate of Status Desired () a did not receive the prior notice.
Name and	Address of Current Registered Age	nt: Name and Address of New Registered Agent:
MIAMI, FL	49 AVE #305 33193 US	or the purpose of changing its registered office or registered agent, or both,
	e of Florida.	
SIGNATUR	RE:	
	Electronic Signature of Register	ed Agent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P () Delete GARCIA, JORGE 10590 NW 7TH TERR MIAMI, FL 33172	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	V () Delete MONTALVO, RAMON 10590 NW 7TH TERR MIAMI, FL 33172	Title: V (X) Change () Addition Name: EMMANUELLI, EDUARDO Address: 8002 SW 133 PL City-St-Zip: MIAMI, FL 33183
Title: Name: Address: City-St-Zip:	S () Delete BAGUER, EFRAIN 10590 NW 7TH TERR MIAMI, FL 33172	Title: S (X) Change () Addition Name: BAGUER, EFRAIN Address: 6864 SW 114 PL City-St-Zip: MIAMI, FL 33173
Title: Name: Address:	T () Delete ROJAS, RUBEN 10590 NW 7TH TERR	Title: T (X) Change () Addition Name: ROJAS, RUBEN Address: 8650 SW 149 AVE, #305

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.

City-St-Zip: MIAMI, FL 33193

SIGNATURE: JORGE GARCIA-NAVARRO P 09/01/2005