

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002278

FILED
Feb 01, 2004
Secretary of State**Entity Name:** EL NUEVO PACTO CORPORATION**Current Principal Place of Business:**7760 W 20 AVENUE
BAY # 2
HIALEAH, FL 33012**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 127484
HIALEAH, FL 330121625**New Mailing Address:****FEI Number:** 65-0904976**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**HERNANDEZ, HILDA T
8835 NW 110 STREET
HIALEAH GARDENS, FL 33018 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: DC () Delete
Name: HERNANDEZ, HILDA T
Address: 8835 NW 110 STREET
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: D () Delete
Name: HERNANDEZ, CANDIDA J
Address: 15242 SW 170 TERRACE
City-St-Zip: MIAMI, FL 33187

Title: D () Delete
Name: FERNANDEZ, ANTONIO J
Address: 403 NW 72 AVE #316
City-St-Zip: MIAMI, FL 33126

Title: DB () Delete
Name: HERNANDEZ, JOSE R
Address: 8835 NW 110 STREET
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D () Change (X) Addition
Name: HERNANDEZ, JUAN C
Address: 15242 SW 170 TERRACE
City-St-Zip: MIAMI, FL 33187

Title: D () Change (X) Addition
Name: HERNANDEZ, MARTA E
Address: 1465 W 4 LANE
City-St-Zip: HIALEAH, FL 33010

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: JOSE R. HERNANDEZ

DB

02/01/2004

Electronic Signature of Signing Officer or Director

Date