

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005275

FILED  
Feb 17, 2005  
Secretary of State

Entity Name: BALLET ROSARIO SUAREZ, CORP.

## Current Principal Place of Business:

1067 SW 27 AVE.  
MIAMI, FL 33135

## New Principal Place of Business:

## Current Mailing Address:

5050 NW 7TH ST  
PH 5  
MIAMI, FL 33126

## New Mailing Address:

FEI Number: 65-0947512      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SUAREZ, ROSARIO  
5820 S.W. 8TH STREET  
MIAMI, FL 33145      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: PD      ( ) Delete  
Name: SUAREZ, ROSARIO  
Address: 5820 S.W. 8TH STREET  
City-St-Zip: MIAMI, FL 33145

Title: SD      ( ) Delete  
Name: PLANAS, TAHINA  
Address: 6491 SW 12 ST.  
City-St-Zip: WEST MIAMI, FL 333144

Title: TD      ( ) Delete  
Name: GARCIA, MARIA A  
Address: 1201 SOUTH LEJUNE RD. #204  
City-St-Zip: MIAMI, FL 33134

Title: D      ( ) Delete  
Name: ALVAREZ, ROBERTO  
Address: 1940 SW 32 CT.  
City-St-Zip: MIAMI, FL 33145

Title: D      ( ) Delete  
Name: PORTAL, PEDRO  
Address: 6491 SW 12ST.  
City-St-Zip: MIAMI, FL 33144

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD      (X) Change ( ) Addition  
Name: SUAREZ, ROSARIO  
Address: 5050 N.W. 7TH STREET  
City-St-Zip: MIAMI, FL 33126

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:

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: ROSARIO SUAREZ

PD

02/17/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date