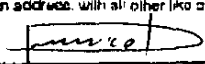


APR-28-2004(VED) 16:38 SHOMAR ACCOUNTING

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91006 044 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P00000005696		
1. Entity Name CASA BLANCA COMMUNICATIONS, INC.		
Principal Place of Business 14104 SW 42ND TERRACE MIAMI, FL 33175		24067405 
Mailing Address 14104 SW 42ND TERRACE MIAMI, FL 33175		
2. Principal Place of Business PEM PROK PINES FL 33025		04282004 Chg-P CR2E034 (10/03)
3. Mailing Address PEM PROK PINES FL 33025		
City & State		4. FEI Number 65-0974542
Zip Country		
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		Applied For ☐ Not Applicable
6. Name and Address of Current Registered Agent SHOMAR, JOSEPH 8015 NW 162 ST MIAMI, FL 33046		
7. Name and Address of New Registered Agent		City FL Zip Code
Name Street Address (P.O. Box Number is Not Acceptable) City		
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 _____ (NOTE: Registered Agent signature must be when renewing) DATE _____		
9. Election Campaign Financing ☐ \$5.00 May be Added to Fees		
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BRIKAT, EL MOSTAFA 14104 SW 42ND TERRACE MIAMI, FL 33175	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BRIKAT, EL MOSTAFA 775 SW 141 AV PEM PROK PINES FL 33025	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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)(a) Florida Statutes. I further certify that the information indicated on this report or supplementary 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 607, 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:  G. 28-04		