## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

ONA ISIDORA CORP.  Octobal Place of Dusiness  Making Address  ORAFEL SACHEZ ABALL EQ.  OD BROKELL AVE, STE 1400  MIM, FL 33131  Pricopal Place of Business  UND BROKEL AVE, STE 1400  MIMM, FL 33131  NORD Paic of Business  UND BROKEL AVE, STE 1400  MIMM, FL 33131  NORD Paic of Business  UND BROKEL AVE, STE 1400  MIMM, FL 33131  NORD Paic of Business  UND BROKEL AVE, STE 1400  MIMM, FL 33131  NORD Paic of Business  UND BROKEL AVE, STE 1400  MIMM, FL 33131  NORD Paic of Business  UND BROKEL AVE, STE 1400  MIMM, FL 33131  Country  Jap  Solid Apt with a w			P00000037	366				อเงาร์เ	RETARY OF S	TATE
BRAFAEL SACHEZ ABALLI ESQ.   COL BAFAEL SACHEZ ABALLI ESQ.   1101 BROCKELL AVE. STE. 1400   MIM. R. 33131   Stephen	. Entity Nam OONA IS		RP.					04 M	AY -6 AM 8:	OO
101 BRICKELL AVE, STE. 1400  MAIN, FL 33131  M	rincipal Plac	ce of Business		Mailing Address			1			
Substance   Substa	101 BRICKI	ELL AVE., STE. 1		1101 BRICKELL AVE.,				I XIII   FIIII   I PIII   IIII   AUG		<b>1</b> ((2001 11 1 <b>3</b> 01
STE. 8.25  OH 450te A Chg-P  CR2E034 (10/05) /// Chg-P  CR2E034 (10/05) // Chg-P  CR2034 (10/05) // Chg	1401	BRICK	<b>▲</b>	1401 ARIC	KELL	AUE.				
Thinh County  To County  To 3313  County  To 3313  County  To Sand Desired  Sa. Sertificite of Status Desired  Sa. Sand Status Desired  Sand Address of New Registrate Agent  More Sand Status Desired  Sand Address of New Registrate Agent  More Sand Status Desired  Sand Address of New Registrate Agent  More Sand Status Desired  Sand Address of New Registrate Agent  More Sand Addre					5		01142004	Chg-P	CR2E034 (10/03)	MKI
Security			20: DA		ا موز				<b>—</b>	· ,
6. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent NOCHEZ-ABALLI, RAFAEL Of BRICKELL AVE., STE. 1400 AMI, FL 33131    Name   SANCHEZ - ABALLI, RAFAEL Of BRICKELL AVE., STE. 1400   Name   Steel Address of New Registered Agent	Zip	C	Country	Zip	Country	· · ·			□ \$8.75 Ac	Iditional
NATURE    Name   Street Address (P.O. Box Number is Not Acceptable)	<u> ၁၁</u>				<u> </u>	054			Fee Requir	ed
Street Address (P.O. Box Number is Not Acceptable)    ILLO   BRICKELL   AVE.   SE.   82.5     City   ILLO   BRICKELL   AVE.   SE.   SE.   SE.   SE.     City   ILLO   BRICKELL   AVE.   SE.   SE.   SE.     City   ILLO   BRICKELL   AVE.   SE.	ANCHEZ				1	Name				•
The above named entity submits this statement of the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent.  NATURE    4/29/04     4/29/04	101 BRIC	CKELL AVE., S								
The above named entity submits this superine 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.    NATURE								LL AVE.		
INATURE  Sprillare, hyped or printed real collections gament and late applicable.  (NOTE: Registered Agent signature recurred when remaining)  FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  E PSD  VALENZUELA LARRANAGA, PATRICIO  OTHANDRESS  OTH-ST-2P  MIAMI, FL 33131  Delete  TITLE  MAKE SIRET ADDRESS  OTH-ST-2P  Delete  TITLE NAME SIRET ADDRESS  OTH-ST-2P  Delete  TITL				2			ni	•		ろ131
After May 1, 2004 Fee will be \$550.00  Trust Fund Contribution.   Added to Fees    OFFICERS AND DIRECTORS   11.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  E	the obligat	tions of registered	d agent.		T-Barrelland -					
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NAME STREET ADDRESS -ST-ZIP  I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or spoplemental reports true and accurate and that my signature shall have the same legal effect as it made under onth that I am an officer or director.	After Ma	PSD VALENZUEL	OFFICERS AND I A LARRANAGA, PA ELL AVE., STE. 1400	Trust Fund Cor  DIRECTORS  Delete  Delete  Delete	TILE NAME STREET A CITY-ST TITLE NAME STREET A CITY-ST	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	ADDITIONS/	ela lar ell Ave	Change  Change	Addition  Addition  Addition  Addition  Addition
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