2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P00000042174

VISTA ALEGRE MANAGEMENT, INC.



Principal Place of Business

1205 SW 37TH AVENUE 3RD FLOOR MIAMI, FL 33135

Mailing Address

1205 SW 37TH AVENUE 3RD FLOOR MIAMI, FL 33135

FILED Apr 19, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

No Chg-P 4. FEI Number

Applied For Not Applicable

5. Certificate of Status Desired

65-1017651

01072004

\$8.75 Additional Fee Required

305 448-8253

CR2E034 (10/03)

6. Name and Address of Current Registered Agent

ALVAREZ, CLAVAIO 1205 SW 37TH AVE. MIAMI, FL 33135

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the priors of registered agent.	urpose of changing its registered	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_				required when reinstating)	DATE
	Signature, typed or printed name of registered agent and title if	rapplicable. (NU IE. Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campalgn Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					<u> </u>
TITLE NAME STREET ADDRESS GITY-ST-ZIP	P ALVAREZ, CLAUDIO I 1205 SW 37TH AVE., #300 MIAMI, FL 33135				U00000118985 04/19/04-80082-005 150.00
TITLE NAME STREET ADDRESS CITY+ST+ZIP					1.
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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 supplemental reports true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trusted 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.					