2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 13, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # P0000005205 al investment brokers, in			Sec	iciai y	Ji State	
Principal Plac 5035 SW 11 MIAMI, FL 3					WW(M) M172M (1M1) MM1M3 W	libe sylvany (t. 1887	
DO NOT WRITE IN THIS SPACE 5. Name and Address of Current Registered Agent				01102005 No Chg-P CR2E034 (10/03) 4. FEI Number			
DE CORCHO, BLANCA P 5035 SW 113TH AVE MIAMI, FL 33165			DO NOT WRITE IN THIS SPACE				
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 Signature, typed or printed name of registered agent and site if applicable. (NOTE. Begistered Agent signature required when refrastating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				.00 May Be led to Fees			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ALBELO, GABRIEL C 1611 SOUTH BAYSHORE DR. COCONUT GROVE, FL 33133	CIONS .	: :		•		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE CORCHO, BLANCA P 5035 SW 113TH AVE MIAMI, FL 33165		-		0000001 01/13/05-6	.80025 30042-009	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RODRIGUEZ, JAIME V 16424 SW 47 TERR. MIAMI, FL 33185				NOT W		,
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby of indicated of the corchanged,	pertify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowere or on an attachment with an address, with al	ling does not qualify for the exer and accurate and that my signat d to execute this report as requil I other like empowered.	mption stated in Se ure shall have the red by Chapter 607	ection 119.07(3) same legal effec 7. Florida Statute	(i), Florida Statutes. I for as if made under oales, and that my name	urther certify that tih; that I am an of appears in Block	the information ficer or director 10 or Block 11 if