

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000057105

FILED
Apr 28, 2005
Secretary of State

Entity Name: COMERCIO UNIVERSAL S.A. INC.

Current Principal Place of Business:

338 MINORCA AVENUE
CORAL GABLES, FL 33134

New Principal Place of Business:

2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134

Current Mailing Address:

338 MINORCA AVENUE
CORAL GABLES, FL 33134

New Mailing Address:

2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134

FEI Number: 65-1032730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABEZA, MANUEL E
338 MINORCA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA
2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134 US

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: ANTONIO GARCIA

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: VIVES, FERNANDO
Address: 4779 COLLINS AVENUE, APT. 3107
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP () Delete
Name: LOPEZ, PATRICIA
Address: 4779 COLLINS AVENUE, APT. 3107
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FERNANDO VIVES

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date