


2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

05-03-2004 90812 001 ***600.00

DOCUMENT # P00000063763

1. Entity Name
 TEQUESTA PROPERTIES, INC.



Principal Place of Business
 2525 SOUTHWEST 3RD AVENUE
 SUITE 304
 MIAMI, FL 33129

Mailing Address
 2525 SOUTHWEST 3RD AVENUE
 SUITE 304
 MIAMI, FL 33129

66418062



2. Principal Place of Business
 3191 CORAL WAY
 SUITE 406
 MIAMI, FL
 33145 USA

3. Mailing Address
 3191 CORAL WAY
 SUITE 406
 MIAMI, FL
 33145 USA

04302004 Chg-P CR2E034 (10/03)

4. FEI Number
 65-1020669

5. Certificate of Status Desired \$8.75 Additional Fee Required

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
 PILA, TOMAS A ESQ.
 2525 SW THIRD AVE.
 STE 304
 MIAMI, FL 33129

7. Name and Address of New Registered Agent
 Name: PILA, TOMAS A., ESQ.
 Street Address (P.O. Box Number is Not Acceptable):
 3191 CORAL WAY
 SUITE 406
 City: MIAMI FL Zip Code: 33145

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: *Tomas A. Pila* DATE: 4/30/04

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD PILA, TOMAS A ESQ. 2525 SOUTHWEST 3RD AVENUE MIAMI, FL 33129	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CRESPO, JR., ELOY 2525 SW 3RD AVE., STE. 304 MIAMI, FL 33129	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD PILA, TOMAS A. 3191 CORAL WAY, SUITE 406 MIAMI, FL 33145	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CRESPO, JR., ELOY 3191 CORAL WAY, SUITE 406 MIAMI, FL 33145	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 an other like empowered.

SIGNATURE: *Tomas A. Pila, Pres.* DATE: 4/30/04 DAYTIME PHONE #