

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90245 032 ***150.00

DOCUMENT # P00000064902

1. Entity Name

LIAHONA VENTURES INC.



Principal Place of Business

605 BELVEDERE RD
STE 18
WEST PALM BEACH FL 33405

Mailing Address

605 BELVEDERE RD
STE 18
WEST PALM BEACH FL 33405

54035419



MOORE

CR2E034 (11/03)

2. Principal Place of Business

2112 S. Congress Ave

Suite, Apt. #, etc.

Suite 208

3. Mailing Address

2112 S. Congress Ave

Suite, Apt. #, etc.

Suite 208

City & State

West Palm Beach FL

City & State

West Palm Beach FL

Zip

33406

Country

Palm Beach

Zip

33406

Country

Palm Beach

4. FEI Number

31-1716614

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PATERNOSTER, GONZALO M
10165 STONEHENGE CIR
APT 1514
BOYNTON BEACH FL 33-7437

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

2112 S. Congress Ave

Suite 208

City

West Palm Beach

FL

Zip Code

33406

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/15/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME PATERNOSTER, GONZALO M
STREET ADDRESS 10165 STONEHENGE CIR., APT 1514
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME PATERNOSTER, GONZALO M.
STREET ADDRESS 2112 S. Congress Ave, Suite 208
CITY-ST-ZIP West Palm Beach, FL 33406

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/04

Date

561-655-8050

Daytime Phone #