

2004 FOR PROFIT CORPORATION ANNUAL REPORT

1 of 2

DOCUMENT # P00000068030 1. Entity Name Bravo + Partners Corp.				FILED 04 NOV -5 PM 2:06 SECRETARY OF STATE TALLAHASSEE, FLORIDA REINSTATEMENT 2004 05182004 Chg-P CR2E034 (10/03)	
Principal Place of Business Mailing Address 					
2. Principal Place of Business 10780 Westwood Lake Dr.		3. Mailing Address Same as Principal			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Miami, Florida		City & State 			
Zip 33165		Country USA		4. FEI Number 65-1024274	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
				Name Deeb Kevin Esq. / Deeb + Deeb PA	
				Street Address (P.O. Box Number is Not Acceptable) 2350 Coral Way Ste 401	
				City FL Zip Code Miami 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 Armando Bravo 10/26/04 <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D/P	NAME Bravo, Armando		<input type="checkbox"/> Delete		
STREET ADDRESS 10780 Westwood Lake Drive	CITY-ST-ZIP Miami, FL 33165		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE 	<input type="checkbox"/> Delete		TITLE 		
NAME 	<input type="checkbox"/> Delete		NAME 		
STREET ADDRESS 	<input type="checkbox"/> Delete		STREET ADDRESS 		
CITY-ST-ZIP 	<input type="checkbox"/> Delete		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.			800042522038 11/05/04--01041--010 **150.00		
SIGNATURE:			Armando Bravo 10/26/04 (352) 343-2505 <small>(Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date Daytime Phone #</small>		

2052

Bravo & Partners, Corp.
10780 Westwood Lake Dr
Miami, FL 33165

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: P00000068030

I am writing to you because I did not receive the 2004 annual report for my business. I became aware of your new change in procedures when I contacted your office. I do not recall receiving the post card alerting the annual report. I ask that you please waive the penalty and accept my renewal fee in the amount of \$150.00, since I do not have the money to pay for the penalty. I hope that you take this all into consideration.

Thanking you in advance for your cooperation with this matter,



Armando Bravo