


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Apr 25, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000080666**  
 1. Entity Name  
**ALTAVISTA SUPPLIES CORPORATION**



Principal Place of Business      Mailing Address  
**6922 NW 179 ST**                      **6922 NW 179 ST**  
**UNIT 107**                                      **UNIT 107**  
**HIALEAH, FL 33015**                      **HIALEAH, FL 33015**

**DO NOT WRITE IN THIS SPACE**



04152005    No Chg-P    CR2E034 (10/03)

4. FEI Number <b>65-1036998</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

8. Name and Address of Current Registered Agent  
**BARRERA, RENE A**  
**6922 NW 179 ST**  
**UNIT 107**  
**MIAMI, FL 33015**

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BARRERA, RENE A
STREET ADDRESS	6922 NW 179 ST., UNIT 107
CITY-ST-ZIP	MIAMI, FL 33015
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

04/25/05-80005-021 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Alejandro Barrera      Date: 04.12.05      Daytime Phone #: 305 5059998