

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000090111

Entity Name: POPLIFE, INC.

FILED  
Apr 27, 2005  
Secretary of State

## Current Principal Place of Business:

127 PHOENETIA AVENUE  
SUITE 4  
CORAL GABLES, FL 33134

## New Principal Place of Business:

780 NE 69TH ST  
SUITE 309  
MIAMI, FL 33138

## Current Mailing Address:

127 PHOENETIA AVENUE  
SUITE 4  
CORAL GABLES, FL 33134

## New Mailing Address:

780 NE 69TH ST.  
SUITE 309  
MIAMI, FL 33138

FEI Number: 65-1043893

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LORIE, ARAMIS  
127 PHOENETIA AVENUE  
SUITE 4  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

LORIE, ARAMIS  
780 NE 69TH ST  
SUITE 309  
MIAMI, FL 33138 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:

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LORIE, ARAMIS  
Address: 127 PHOENETIA AVENUE SUITE 4  
City-St-Zip: CORAL GABLES, FL 33134

Title: VD ( ) Delete  
Name: MILIAN, RAYMOND  
Address: 1451 N.W. 31ST AVENUE  
City-St-Zip: MIAMI, FL 33125

Title: SD ( ) Delete  
Name: BASTI, BARBARA  
Address: 127 PHOENETIA AVENUE SUITE 4  
City-St-Zip: CORAL GABLES, FL 33134

Title: TD ( ) Delete  
Name: MILIAN, PAULA  
Address: 1451 NW 31ST AVE  
City-St-Zip: MIAMI, FL 33125

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LORIE, ARAMIS  
Address: 780 NE 69TH ST. #309  
City-St-Zip: MIAMI, FL 33138

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: BASTI, BARBARA  
Address: 780 NE 69TH ST #309  
City-St-Zip: MIAMI, FL 33138

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: BARBARA BASTI

SD

04/27/2005

Electronic Signature of Signing Officer or Director

Date