
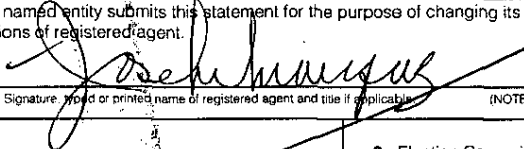
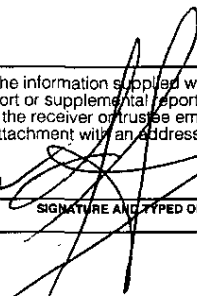


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90288 015 ***150.00

DOCUMENT # P0000098809 1. Entity Name 4040 EAST 4 AVE. BUILDING, INC.					
Principal Place of Business 9688 SW 24TH STREET MIAMI, FL 33165			Mailing Address 9688 SW 24TH STREET MIAMI, FL 33165		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0942637	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
MARQUEZ, JOSE M ESQ. 782 NW LEJEUNE ROAD SUITE 548 MIAMI, FL 33126				Name MARQUEZ & MARCELO-ROBATNA, P.A. Street Address (P.O. Box Number is Not Acceptable) 782 NW LeJeune Road, Suite 548 City MIAMI FL Zip Code 33126	
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  <small>Signature, word or printed name of registered agent and title if applicable</small>				03/30/2004 <small>DATE</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERRAN, MANUEL A 8460 SW 5TH STREET MIAMI, FL 33144	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HERRAN, Manuel A. 8460 SW 5 Street Miami, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP D HERRAN, JOSE A 8455 GRAND CANAL DRIVE MIAMI, FL 33144		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP S VALDES, Daniel R. 9755 SW 62 Street Miami, FL 33173	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D HERRAN, EZEQUIEL 14020 SW 36TH STREET MIAMI, FL 33175		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP AS HERRAN, Ezequiel 14020 SW 36 Street Miami, FL 33175	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D GUERRA, ARMANDO J 9475 JOURNEY'S END ROAD CORAL GABLES, FL 33156		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP VP GUERRA, Armando J. 9475 Journey's End Road Coral Gables, FL 33156	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D VALDES, DANIEL R 9755 SW 62ND STREET MIAMI, FL 33173		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP T HERRAN, Jose A. 8455 Grand Canal Drive Miami, FL 33144	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE 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: 				03/30/2004 (305) 221-8351 <small>Date Daytime Phone #</small>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					