2004 FOR PROFIT CORPORATION

muci

SIGNATURE AND TYPYD OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \(\)

Jul 14, 2004 8:00 am Secretary of State ANNUAL REPORT 07-14-2004 90003 022 ***158.75 DOCUMENT # P00000106474 1. Entity Name ANLÚ DEVELOPMENT CORP. Principal Place of Business Mailing Address 44048373 2121 PONCE DE LEON BLVD., SUITE #240 2121 PONCE DE LEON BLVD., SUITE #240 CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 2. Principal Place of Business 3. Mailing Address 626 CORAL WAY 626 CORAL WAY Suite, Apt. #, etc. 07092004 Chq-P CR2E034 (10/03) UNIT 801 **UNIT 801** City & State Applied For City & State 4. FEI Number CORAL GABLES 65-1058181 Not Applicable CORAL GABLES \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent PRATS, GABRIEL Street Address (P.O. Box Number is Not Acceptable) 2121 PONCE DE LEON BLVD., SUITE #240 CORAL GABLES, FL 33134 Zip Code 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 FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be . \square · Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. PSTD ■ Addition TITLE Oelete TITLE NAME LEQUERICA, RICARDO A NAME 2121 PONCE DE LEON BLVD., SUITE #240 STREET ADDRESS STREET ADDRESS CORAL GABLES, FL 33134 CITY-ST-ZIP CORAL GABLES, FL. 33134 CHY-ST-78 ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-Z:P TOTALE ☐ Delete mue Change ☐ Add:tion NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZiP CITY-ST-ZIP ☐ Detete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-2IP Delete Change Addition TITLE TITLE NAME NAME SUBSET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP CHY-SI-78P 12. Thereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation or the receiver of trustee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 607 an attachment with an angle of the proposed to the corporation of the corpora

FILED

Date

Daytime Phone #

attachment # P00000106474

ANLU DEVELOPMENT CORP. 44048373

626 Coral Way Unit 801 Coral Gables, Fl 33134

July 9, 2004

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, Fl 32302-1500

To whom it may concern:

Our Accountants have checked the records at the Division of Corporations and found that the 2004 Uniform Business Report (U.B.R) for our company has not been filed.

According to our records we didn't received the 2004 U.B.R form. Enclosed is a completed 2004 U.B.R. and a check for \$158.75. We hereby request an abatement of the filling late penalties.

If you have any questions, please call our accountants Prats Fernandez & Co. at Tel: (305) 444-8333.

Sincerely,

ANLU DEVELOPMENT CORP.