
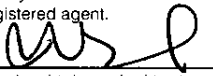
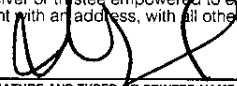


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 25, 2004 8:00 am**  
**Secretary of State**

03-25-2004 90028 003 \*\*\*158.75

<b>DOCUMENT # P00000107314</b>					
<b>1. Entity Name</b> AVSOURCE, INC.					
<b>Principal Place of Business</b> 1912 NW 94TH AVENUE MIAMI, FL 33172			<b>Mailing Address</b> 1912 NW 94TH AVENUE MIAMI, FL 33172		
<b>2. Principal Place of Business</b> 10455 NW 37TH TERRACE Suite, Apt. #, etc.		<b>3. Mailing Address</b> 10455 NW 37TH TERRACE Suite, Apt. #, etc.			
<b>City &amp; State</b> MIAMI, FL		<b>City &amp; State</b> MIAMI, FL		<b>4. FEI Number</b> 65-1060876	
<b>Zip</b> 33178		<b>Country</b> USA		<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> MEJIA, JORGE E 1912 NW 94TH AVENUE MIAMI, FL 33172			<b>7. Name and Address of New Registered Agent</b> Name <b>JORGE E. MEJIA</b> Street Address (P.O. Box Number is Not Acceptable) <b>10455 NW 37TH TERRACE</b> City <b>MIAMI</b> <b>FL</b> <b>Zip Code 33178</b>		
<b>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.</b> SIGNATURE  <b>JORGE E. MEJIA</b> <span style="float: right;"><b>3/23/2004</b></span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MEJIA, JORGE 1912 NW 94TH AVENUE MIAMI, FL 33172		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MEJIA, JORGE 10455 NW 37 TERRACE MIAMI, FL 33178	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CORBA, RICARDO 10455 NW 37 TERRACE MIAMI, FL 33178	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>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.</b>					
SIGNATURE:  <b>JORGE E. MEJIA</b> <span style="float: right;"><b>3/23/2004</b> <b>305 599 1108</b></span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					