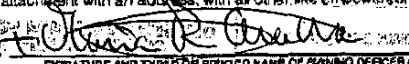


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91038 030 ***150.00

DOCUMENT # P01000007382																																																						
1. Entity Name D.Y.B. CORP.																																																						
Principal Place of Business 8568 S.W. 8 ST. MIAMI, FL 33144			Mailing Address 8568 S.W. 8 ST. MIAMI, FL 33144																																																			
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: 65-1070285				Applied For Not Applicable																																																		
5. Certificate of Status Desired ☐				58.75 Additional Fee Required																																																		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																																																			
RUIZ, MARIA ROSARIO 8568 S.W. 8 STREET MIAMI, FL 33144			Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when re-appointing) DATE _____																																																						
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																						
10. OFFICERS AND DIRECTORS																																																						
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																																						
<table border="1"> <tr> <td>TITLE</td> <td>NAME</td> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> <td>☐ Delete</td> <td>☐ Change</td> <td>☐ Addition</td> </tr> <tr> <td></td> <td>RUIZ, MARIA ROSARIO</td> <td>8568 S.W. 8 ST.</td> <td>MIAMI, FL 33144</td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> <td>☐ Delete</td> <td>☐ Change</td> <td>☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> <td>☐ Delete</td> <td>☐ Change</td> <td>☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> <td>☐ Delete</td> <td>☐ Change</td> <td>☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> <td>☐ Delete</td> <td>☐ Change</td> <td>☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> <td>☐ Delete</td> <td>☐ Change</td> <td>☐ Addition</td> </tr> </table>						TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	☐ Change	☐ Addition		RUIZ, MARIA ROSARIO	8568 S.W. 8 ST.	MIAMI, FL 33144				TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	☐ Change	☐ Addition	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	☐ Change	☐ Addition	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	☐ Change	☐ Addition	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	☐ Change	☐ Addition	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	☐ Change	☐ Addition
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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)(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 11.2 changed, or on an attachment with an address, with all other like empowered, if at																																																						
SIGNATURE:  DATE: _____																																																						
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: _____ DATE: _____																																																						