2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 25, 2005 8:00 am Secretary of State

DOCUMENT # P01000010279 1. Entity Name RAFAEL POINT, INC.									03-25-2005	90041 00	6 ***150.	00
Principal Place of Business ⁴ Mailing Address												
,				3136 NW 27TH AVENUE								
MIAMI, FL 33142 ~ 5820				MIAMI, FL 33142-53220					. 50	03079	15	
		,-			t (881186) III	B. GP & 17 B 1 B 17 1 G 11 B 12						
O Delevis et D	lana at Dunia		2. Mailing Address									
2. Principal Place of Business				3. Mailing Address			ļ		88161 HOW 88331 88111 88	IIN OBIOLINĀM OD	'ain mani fanda fan	8 3 1 U 1881
Suite, Apt. #, etc.				Suite, Apt. #, etc.				03222005	Chg-P	CR2E0	34 (10/03)	
City & State				City & State				4. FEI Number				plied For
Zip Country				Zip Count			65-1074848			\$8.75 Addi	Applicable	
	333.47				,	5. Certificate of Status Desired . Fee Required						
6. Name and Address of Current Registered Agent								7. Name and	Address of New I	Registered /	Agent	
MARTINES	7 DAEAE	i				Name GRACIAN ISIDEON						
MARTINEZ, RAFAEL 4071 NW 6TH STREET						Street Address (P.O. Box Number is Net Acceptable)						
MIAMI, FL 33126							80 I_	INCIA	n Creek	Ja =	#601	
						City n	Ai M	mi Ba	2010	FL	Zip Code	ul
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 obligati	ions of regist	tered agent.	//	•							_	-
SIGNATURE_	VII.	racian	brene			3-2	Z-01					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.								.00 May Be ed to Fees				
10.		OFFI	CERS AND DIREC					ADDITIONS	CHANGES TO OF	FICERS AND	DIRECTORS	SIN 11
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NAME	MARTINEZ, RAFAEL				E	680	ol India	n Creek D	rive#	601	ļ	
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	certify that th	e information a	ugaliad with this !	iliaa daas ast susifi-te			od in C	otion 110 07(0)	(i) Florido Status	i forether s	rify that the	formation
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. If 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.												