

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 16, 2004 8:00 am
Secretary of State

08-16-2004 90012 040 ***150.00

DOCUMENT # P01000018804 1. Entity Name KAYESK INTERNATIONAL CORP.					
Principal Place of Business 3899 NW 7TH STREET SUITE 203 MIAMI, FL 33126			Mailing Address 3899 NW 7TH STREET SUITE 203 MIAMI, FL 33126		
2. Principal Place of Business 8381 NW 66 STREET Suite, Apt. #, etc.		3. Mailing Address 8381 NW 66 STREET Suite, Apt. #, etc.			
City & State MIAMI FL		City & State MIAMI FL		4. FEI Number 65-1081386	
Zip 33166		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARRERO, CIPRIANO A 8381 NW 66TH STREET MIAMI, FL 33166				7. Name and Address of New Registered Agent 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 reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD CAYCEDO, FELIPE ☐ Delete 3899 NW 7TH STREET SUITE 203 MIAMI, FL 33126		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD CAYCEDO, FELIPE ☒ Change ☐ Addition 8381 NW 66 STREET MIAMI FL 33166	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ESCALONA, EDGAR ☐ Delete 3899 NW 7TH STREET SUITE 203 MIAMI, FL 33126		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ESCALONA EDGAR ☒ Change ☐ Addition 8381 NW 66 STREET MIAMI FL 33166	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
				Date _____ Daytime Phone # _____	

Attachment

44051810
#P01000018804

August 9, 2004

DIVISION OF CORPORATIONS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

Dear Sirs:

Attached you will find the 2004 for Profit Annual Report and also you will find the
Check # 561 for \$150.00 covering the fee.

We respectfully request the waiving of the late filling fee due to that we never received
the report by mail.

Thank you very much for your cooperation

Very truly yours


P. Felipe Caycedo