

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000019367

Entity Name: A.C. PORTELA WOODS, INC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

LAW OFFICE OF STEWART A. MERKIN/A. LEON
444 BRICKELL AVE., SUITE 300
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

LAW OFFICE OF STEWART A. MERKIN/A. LEON
444 BRICKELL AVE., SUITE 300
MIAMI, FL 33131

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, ALBERTO A ESQ
444 BRICKELL AVE.
SUITE 300
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARNEIRO PORTELA, ADALTO
Address: 444 BRICKELL AVE, SUITE 300
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: MACHADO PORTELA, ODETE
Address: 444 BRICKELL AVE, SUITE 300
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PORTELA ADALTO

D

04/27/2005

Electronic Signature of Signing Officer or Director

Date