

2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Mar 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000046628
 1. Entity Name
 SANZ INVESTMENT GROUP, INC.



Principal Place of Business 1781 SW 21 STREET MIAMI, FL 33145	Mailing Address 1781 SW 21 STREET MIAMI, FL 33145
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DO NOT WRITE IN THIS SPACE



02132004 No Chg-P CR2E034 (10/03)

4. FEI Number 02-0579744	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

SANZ, RAFAEL J
 1781 SW 21 STREET
 MIAMI, FL 33145

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

U00000093537
 03/22/04-80022-006 158.75

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SANZ, RAFAEL J 1781 SW 21 STREET MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SANZ, JORGE A 1781 SW 21 STREET MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SANZ, RAFAEL M 1781 SW 21 STREET MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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)(f), 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: Rafael J. Sanz Date: 03/17/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #