

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004 8:00 am
Secretary of State

01-15-2004 90006 011 ***150.00

DOCUMENT # P01000050798 1. Entity Name MOLLEDA CORP.			
Principal Place of Business 4851 NW 103RD AVE. SUITE 44B SUNRISE, FL 33351		Mailing Address 4851 NW 103RD AVE. SUITE 44B SUNRISE, FL 33351	
2. Principal Place of Business 5150 FLAMINGO ROAD		3. Mailing Address 268181	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. P.O. BOX	
City & State COOPER CITY, FLORIDA		City & State WESTON	
Zip 33330		Zip 33326-8181	
Country USA		Country USA	
4. FEI Number 65-1107919		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MACEDA, FIDEL 4851 N.W. 103RD AVE., SUITE 44B SUNRISE, FL 33351		7. Name and Address of New Registered Agent Name MACEDA, FIDEL Street Address (P.O. Box Number is Not Acceptable) 5150 FLAMINGO ROAD City COOPER CITY FL Zip Code 33330	
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 1-10-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACEDA GARCIA, FIDEL 4851 N.W. 103RD AVENUE, SUITE 44 B SUNRISE, FL 33351 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACEDA GARCIA, FIDEL 5150 FLAMINGO ROAD COOPER CITY, FL 33330 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACEDA GARCIA, FERNANDO 4851 N.W. 103RD AVENUE, SUITE 44 B SUNRISE, FL 33351 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACEDA GARCIA, FERNANDO 5150 FLAMINGO ROAD COOPER CITY, FL 33330 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:		1-10-04 954 689 4790 <small>Date Daytime Phone #</small>	