

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000052622

FILED  
Apr 20, 2004  
Secretary of State

Entity Name: YOUNG FOR EVER, INC.

## Current Principal Place of Business:

14309 SW 96 ST. #501  
MIAMI, FL 33186

## New Principal Place of Business:

14309 SW 96 ST  
501  
MIAMI, FL 33186

## Current Mailing Address:

14309 SW 96 ST. #501  
MIAMI, FL 33186

## New Mailing Address:

14309 SW 96 ST  
501  
MIAMI, FL 33186

FEI Number: 65-1117978

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HENAO, LUZ M  
14309 SW 96 ST. #501  
MIAMI, FL 33186

## Name and Address of New Registered Agent:

HENAO, LUZ M  
14309 SW 96 ST  
501  
MIAMI, FL 33186

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: LUZ M. HENAO

04/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HENAO, LUZ M  
Address: 14309 SW 96 ST. #501  
City-St-Zip: MIAMI, FL 33186

Title: VPD ( ) Delete  
Name: ALARCON, JORGE NAYID  
Address: 14309 SW 96 ST. #501  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HENAO, LUZ M  
Address: 14309 SW 96 ST #501  
City-St-Zip: MIAMI, FL 33186

Title: VD (X) Change ( ) Addition  
Name: ALARCON, JORGE N  
Address: 14309 SW 96 ST #501  
City-St-Zip: MIAMI, FL 33186

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: LUZ M. HENAO

PD

04/20/2004

Electronic Signature of Signing Officer or Director

Date