

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000065116

Entity Name: PROINPE, CORP.

FILED  
Jan 17, 2004  
Secretary of State

## Current Principal Place of Business:

10553 NW 53RD STREET  
SUNRISE, FL 33351 US

## New Principal Place of Business:

## Current Mailing Address:

10553 NW 53RD STREET  
SUNRISE, FL 33351 US

## New Mailing Address:

FEI Number: 65-1123803

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROJAS, SOLIS  
3860 WEST GARDENIA AVE.  
WESTON, FL 33332

## Name and Address of New Registered Agent:

ROJAS, SOLIS  
1445 MARTINIQUE COURT  
APT. 6008  
WESTON, FL 33326

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:

01/17/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ROJAS, SOLIS  
Address: 3860 WEST GARDENIA AVENUE  
City-St-Zip: WESTON, FL 33332

Title: VD ( ) Delete  
Name: DE ROJAS, MARIA C  
Address: 3860 WEST GARDENIA AVENUE  
City-St-Zip: WESTON, FL 33332

Title: GMD ( ) Delete  
Name: ROJAS, REBECA C  
Address: 3860 WEST GARDENIA AVENUE  
City-St-Zip: WESTON, FL 33332

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SOLIS ROJAS

PD

01/17/2004

Electronic Signature of Signing Officer or Director

Date