2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000068268

Entity Name: CEGAZ, INC.

FILED Jan 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O BARED AND ASSOC. PA
1500 SAN REMO AVE SUITE 177
CORAL GABLES, FL 33146

C/O BARED AND ASSOC. PA
1500 SAN REMO AVE SUITE 103
CORAL GABLES, FL 33146

Current Mailing Address: New Mailing Address:

C/O BARED AND ASSOC. PA
1500 SAN REMO AVE SUITE 177
CORAL GABLES, FL 33146

C/O BARED AND ASSOC. PA
1500 SAN REMO AVE SUITE 103
CORAL GABLES, FL 33146

FEI Number: 65-1120409 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARED AND ASSOCIATES, P.A.

1500 SAN REMO AVE #177

CORAL GABLES, FL 33146 US

BARED AND ASSOCIATES, P.A.

1500 SAN REMO AVE #103

CORAL GABLES, FL 33146 US

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: 01/28/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete

 Name:
 ZEVALLOS, CARLOS E

 Address:
 1500 SAN REMO AVE SUITE 177

 City-St-Zip:
 CORAL GABLES, FL 33146

 Title:
 VPSD () Delete

 Name:
 BURGA, MARIELITA S

 Address:
 1500 SAN REMO AVE., #177

 City-St-Zip:
 CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZEVALLOS, CARLOS E
Address: 1500 SAN REMO AVE SUITE 103
City-St-Zip: CORAL GABLES, FL 33146

Title: VPSD (X) Change () Addition

Name: BURGA, MARIELITA S Address: 1500 SAN REMO AVE., #103 City-St-Zip: CORAL GABLES, FL 33146

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: CARLOS ZAVALLOS PD 01/28/2004