## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000069848

Entity Name: HEMISPHERE FINANCIAL SERVICES, INC.

FILED Mar 19, 2004 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
8600 NW 36 ST., SUITE 86 MIAMI, FL 33166	00		
Current Mailing Address:		New Mailing Address:	
8600 NW 36 ST., SUITE 800 MIAMI, FL 33166			
FEI Number: 65-1143304	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:	
CORPORATION COMPAN 1500 MIAMI CENTER 201 S BISCAYNE BLVD MIAMI, FL 33131 US	NY OF MIAMI		

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

Election Campaign Financing Trust Fund Contribution ( ).

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

in the State of Florida.

SIGNATURE:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

( ) Delete Title: Title: (X) Change ( ) Addition ALONSO, ANTONIO ALONSO, ANTONIO Name: Name: 8600 NW 36 ST #800 2159 CORAL WAY Address: Address: City-St-Zip: MIAMI, FL 33145 City-St-Zip: MIAMI, FL 33166 Title: () Delete Title: (X) Change ( ) Addition SCHWARTZ, DANIEL SCHWARTZ, DANIEL Name: Name: Address: 2159 CORAL WAY Address: 8600 NW 36 ST #800 MIAMI, FL 33145 MIAMI, FL 33166 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition

 Name:
 DAILEY, RICHÁRD
 Name:
 DAILEY, RICHÁRD

 Address:
 2159 CORAL WAY
 Address:
 8600 NW 36 ST #800

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:
 MIAMI, FL 33166

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: DANIEL SCHWARTZ PRES 03/19/2004