


FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90270 049 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000070319			
1. Entity Name MAE INTERNATIONAL, INC.			
Principal Place of Business 1372 N.W. 78TH AVENUE MIAMI, FL 33126		Mailing Address 231 ALTARA AVENUE CORAL GABLES, FL 33146	
2. Principal Place of Business 7500 NW 54 ST Suite, Apt. #, etc.		3. Mailing Address 7500 NW 54 ST Suite, Apt. #, etc.	
City & State Miami - FL		City & State Miami - FL	
Zip 33166		Country	
4. FEI Number 65-1122471		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 GARCIA, LEONARDO 7500 NW 54 STREET MIAMI, FL 33166		7. Name and Address of New Registered Agent Name Gonzalez, Eugenio R. Street Address (P.O. Box Number is Not Acceptable) 7500 NW 54 ST City Miami FL Zip Code 33166	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
DATE _____			
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	PD GONZALEZ, EUGENIO R 1A. AV. URB. MIRAMAR PARIATA NO. 27-13 MAIQUETIA ESTADO VERGAS VEN, <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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
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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: Eugenio Rodriguez		04/21/04 58-212-231-6921	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	