## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000077398

FILED Apr 14, 2004 Secretary of State

Entity Name: ENTRE NOSOTRAS, INC. **Current Principal Place of Business: New Principal Place of Business:** 8527 PINES BLVD STE 212 PEMBROKE PINES, FL 33024 **Current Mailing Address: New Mailing Address:** 8527 PINES BLVD STE 212 PEMBROKE PINES, FL 33024 FEI Number: 65-1124002 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VALEDON, BLANCA 3440 SW 144 AVENUE MIRAMAR, FL 33027 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PEMBROKE PINES, FL 33028 US

Title: ( ) Delete Title: (X) Change ( ) Addition VALEDON, BLANCA VALEDON, BLANCA Name: Name: 3440 SW 144TH AVENUE 3440 SW 144TH AVENUE Address: Address: City-St-Zip: MIRAMAR, FL 33126 City-St-Zip: MIRAMAR, FL 33126 US ( ) Delete Title: SD Title: SD (X) Change ( ) Addition Name: JIMENEZ, ENITH Name: JIMENEZ, ENITH 9201 SW 105TH STREET 9201 SW 105TH STREET Address: Address: MIAMI, FL 33176 MIAMI, FL 33176 US City-St-Zip: City-St-Zip: Title: Title: ( ) Change (X) Addition ( ) Delete TD Name: CASTANO, MARTA P Name: 12991 NW 1 ST APARTMENT 107 Address: Address:

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.

City-St-Zip:

SIGNATURE: MARTA PATRICIA CASTANO TD 04/14/2004