## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

	ANNUAL	KEPUK I	_ ==, _	Secretary of State
1. Entity Nam	MENT # P01000079	152		
Principal Plac	e of Business	Mailing Address	·	-
4430 WEST	1ST AVENUE	4430 WEST 1ST AVENUE		
HIALEAH, FL		HIALEAH, FL 33012		
				4   1997/2004   177   2001-05 (CCC)   1855/5   2001   2001/11   2001/15   4001/05   40
		en de de la companya		
DO NOT WRITE IN THIS SPACE				04212004 No Chg-P CR2E034 (10/03)
				4. FEI Number Applied For
				65-1142718   Not Applicable
				5. Certificate of Status Desired  Fee Required
	6. Name and Address of Current Re	ncieterad Agent	<u> </u>	ree nequiled
	6. Name and Address of Current ri	Clatered Adent	-	
COHEN, STEPHAN L ESQ				DO NOT WOITE
20801 BISCAYNE BLVD SUITE 400				DO NOT WRITE
AVENTURA, FL 33180				IN THIS SPACE
				IN THIS SPACE
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 above named entity submits this statement for the purpose of changing its registered onice of registered agent, or both, in the state of Profide, it am familiar with, and accept the obligations of registered agent.				
- CI I TCA				
SIGNATURE COMED, STEDMIN ESY				
Signature, typed or printed name of regisfered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)				
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.  Added to Fees				
10.	OFFICERS AND D	RECTORS	T	04/29/04-80182-005 150.00
INLE	DPS		1	04/29/04-80182-005 150.00
NAME	FALCON, JUSTINO JR		•	
STREET ADDRESS	4430 WEST 1ST AVENUE			
CITY-ST-IIP	HIALEAH, FL 33012	<u> </u>		
THE	DVT			
NAME	FALCON, HEDDA B			·
STREET ADDRESS	4430 WEST 1ST AVENUE			
CITY+ST-ZIP	HIALEAH, FL 33012		1	
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NAME	The control of the co			!
STREET ADDRESS				DO NOT WRITE
CITY-ST-ZIP	<u> </u>	<u></u>	-1	
TITLE				IN THIS SPACE
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STREET ADDRESS	**************************************		!	
CITY-ST-ZP	<u></u>		<u></u>	
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				
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.				