

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000083668

FILED
May 03, 2004
Secretary of State

Entity Name: LOS PENAS ENTERPRISES, INC.

Current Principal Place of Business:

6201 18TH ST S
WEST PALM BEACH, FL 33415

New Principal Place of Business:

14956 74TH ST N
LOXAHATCHEE, FL 33470 US

Current Mailing Address:

6201 18TH ST S
WEST PALM BEACH, FL 33415

New Mailing Address:

14956 74TH ST N
LOXAHATCHEE, FL 33470 US

FEI Number: 65-1132835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENA, VICTORIA
5602 LAKE GEORGE PLACE
LAKE WORTH, FL 33463

Name and Address of New Registered Agent:

PENA, VICTORIA
14956 74TH ST N
LOXAHATCHEE, FL 33470 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:

05/03/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PENA, JOSE
Address: 6201 18TH ST S
City-St-Zip: WEST PALM BEACH, FL 33415

Title: DTSV () Delete
Name: PENA, VICTORIA
Address: 62011 18TH ST S
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PENA, JOSE
Address: 14956 74TH ST N
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: DTSV (X) Change () Addition
Name: PENA, VICTORIA
Address: 14956 74TH ST N
City-St-Zip: LOXAHATCHEE, FL 33470 US

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: VICTORIA PENA

DTSV

05/03/2004

Electronic Signature of Signing Officer or Director

Date