## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## Aug 12, 2004 08:00 AM Secretary of State DOCUMENT # P01000097755 1. Entity Name FIGUEREDO & ASSOCIATES, INC. Mailing Address Principal Place of Business 5900 SW 73 AVENUE 5900 SW 73 AVENUE MIAMI, FL 33143 MIAMI, FL 33143 No Chg-P CR2E034 (10/03) 07062004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1149604 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FIGUEREDO, FRANCISCO 5900 SW 73 AVENUE DO NOT WRITE MIAMI, FL 33143 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 obligations of registered agent. 000000169972 SIGNATURE 00/12/04 00000 009 150.00 (NOTE: Registered Agent signature required when reinstating Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 8, 2004 10. OFFICERS AND DIRECTORS TITLE FIGUEREDO, FRANCISCO NAME STREET ADDRESS 5900 SW 73 AVENUE CITY-ST-ZIP MIAMI, FL 33143 TITLE MAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP N THIS SPACE BILE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 trustes 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.

NING OFFICER OR DIRECTOR

**FILED**