

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000119714

Entity Name: CONDOR BUSINESS CORP.

FILED  
Mar 14, 2005  
Secretary of State

## Current Principal Place of Business:

3952 PINWOOD LANE  
WESTON, FL 33331

## New Principal Place of Business:

## Current Mailing Address:

447 NE 195 STREET  
312  
NORTH MIAMI, FL 33179

## New Mailing Address:

FEI Number: 01-0558990

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARRIDO DIAZ, EDGARDO RAFAEL  
3952 PINWOOD LN.  
WESTON, FL 33331 US

## Name and Address of New Registered Agent:

GARRIDO DIAZ, EDGARDO RAFAEL  
19655 EAST COUNTRY CLUB DR  
#307  
AVENTURA, FL 33180 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:

03/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: GARRIDO, CLAUDIA L  
Address: 3952 PINWOOD LANE  
City-St-Zip: WESTON, FL 33331

Title: DVRT ( ) Delete  
Name: GARRIDO DIAZ, EDGARDO RAFAEL  
Address: 3952 PINWOOD LN.  
City-St-Zip: WESTON, FL 33331

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: GARRIDO, CLAUDIA L  
Address: 19655 EAST COUNTRY CLUB DR #307  
City-St-Zip: AVENTURA, FL 33180

Title: DVRT (X) Change ( ) Addition  
Name: GARRIDO DIAZ, EDGARDO RAFAEL  
Address: 19655 EAST COUNTRY CLUB DR # 307  
City-St-Zip: AVENTURA, FL 33180

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: CLAUDIA GARRIDO

DPS

03/14/2005

Electronic Signature of Signing Officer or Director

Date