


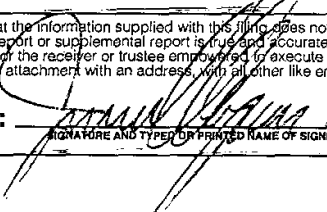


Feb 19
Sec

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000017186			
1. Entity Name AZCUE AND ASSOCIATES INC.			
Principal Place of Business 9240 SUNSET DR STE 229 MIAMI, FL 33173	Mailing Address 9240 SUNSET DR STE 229 MIAMI, FL 33173		
DO NOT WRITE IN THIS SPACE			
		02162005 No Chg-P CR2E034 (10/03)	
		4. FEI Number 01-0611296	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			DO NOT WRITE IN THIS SPACE
AZCUE, JARDIEL 501 HUNTING LODGE DR MIAMI SPRINGS, FL 33166			
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.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP AZCUE, JARDIEL 501 HUNTING LODGE DR MIAMI SPRINGS, FL 33166	 02/19/05-80024-017 150.00 DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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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 changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		2-18-05 803970-7317	