2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000018224

Address:

City-St-Zip:

1313 CORAL WAY

MIAMI, FL 33145

Name: DDOEESSIONAL INVESTMENT

FILED May 10, 2004 Secretary of State

Entity Name: PROFESSIONAL INVESTMENT, INC. **Current Principal Place of Business: New Principal Place of Business:** 1313 CORAL WAY MIAMI, FL 33145 **Current Mailing Address: New Mailing Address:** 1313 CORAL WAY MIAMI, FL 33145 FEI Number: 59-3345555 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RODRIGUEZ, ERIK A 1313 CORAL WAY MIAMI, FL 33145 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition RODRIGUEZ, ERIK A Name: Name: 1131 NW 22ND AVE Address: Address: City-St-Zip: MIAMI, FL 33125 City-St-Zip: Title: Title: () Delete () Change () Addition RODRIGUEZ, ANTONIO Name: Name: 1131 NW 22ND AVE Address: Address: MIAMI, FL 33125 City-St-Zip: City-St-Zip: () Delete Title: Title: SD () Change () Addition RODRIGUEZ, NURIA Name: Name: 1131 NW 22ND AVE Address: Address: City-St-Zip: MIAMI, FL 33125 City-St-Zip: Title: PD () Delete Title: () Change () Addition FIDALGO, GUILLERMO Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: GUILLERMO FIDALGO P/D 05/10/2004