

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90334 031 ***150.00

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1. Entity Name
BLUEFACE DEVELOPMENT INC.

Principal Place of Business
14210 NW 88TH PLACE
HIALEAH, FL 33018

Mailing Address
14210 NW 88TH PLACE
HIALEAH, FL 33018

14001470



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01152004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
01-0616202

Applied For
 Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MARRERO, HECTOR
14210 NW 88TH PLACE
MIAMI, FL 33018

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** Delete
 NAME **BESU, ROGER**
 STREET ADDRESS **1925 BRICKELL AVENUE SUITE D206**
 CITY-ST-ZIP **MIAMI, FL 33129**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME **PRESIDENT**
 STREET ADDRESS **MANUEL GONZALEZ**
 CITY-ST-ZIP **9173 N.W. 147 TERRACE MIAMI LAKES, FL 33018**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME **VICEPRESIDENT**
 STREET ADDRESS **GUILLERMO GONZALEZ**
 CITY-ST-ZIP **9173 N.W. 147 TERRACE MIAMI LAKES, FL 33018**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME **SECRETARY**
 STREET ADDRESS **HECTOR MARRERO**
 CITY-ST-ZIP **14210 N.W. 88 PLACE MIAMI, FL 33018**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 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)(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: **Guillermo Gonzalez** APRIL 2004 (305) 992-8853
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #