

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000027985

FILED
Apr 15, 2004
Secretary of State

Entity Name: ARCHITECTURAL IMPACT SYSTEMS, INC.

Current Principal Place of Business:

1787 WEST 32 PLACE
HIALEAH, FL 33012

New Principal Place of Business:

7500 NW 25 ST
STE 235
MIAMI, FL 33122

Current Mailing Address:

1787 WEST 32 PLACE
HIALEAH, FL 33012

New Mailing Address:

7500 NW 25 ST
STE 235
MIAMI, FL 33122

FEI Number: 51-0659926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FONT, ANNA
1787 WEST 32 PLACE
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

FONT, ANNA
7500 NW 25 ST
STE 235
MIAMI, FL 33122 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:

04/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RODRIGUEZ, CARLOS E
Address: 1787 W 32 PL
City-St-Zip: HIALEAH, FL 33012 US

Title: VTD () Delete
Name: FONT, ANNA
Address: 1787 W 32 PL
City-St-Zip: HIALEAH, FL 33012 US

Title: VSD (X) Delete
Name: SANDOVAL, NATIVIDAD A
Address: 1787 W 32 PL
City-St-Zip: HIALEAH, FL 33012 US

Title: VD (X) Delete
Name: FONT, JORGE
Address: 1787 W 32 PL
City-St-Zip: HIALEAH, FL 33012 US

Title: VPD (X) Delete
Name: LIZCANO, JUAN
Address: 1787 WEST 32 PLACE
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: FONT, ANNA M
Address: 7500 NW 25 ST STE 235
City-St-Zip: MIAMI, FL 33122 US

Title: VPSD (X) Change () Addition
Name: SANDOVAL, NATIVIDAD A
Address: 7500 NW 25 ST STE 235
City-St-Zip: MIAMI, FL 33122 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANNA M FONT

PTD

04/15/2004

Electronic Signature of Signing Officer or Director

Date