2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000033883

City-St-Zip:

HIALEAH, FL 33010

Entity Name: CENOZOIC CORPORATION

FILED Apr 21, 2005 Secretary of State

Entity Nar	ne: CENOZOI	CCORPORATION				
Current Principal Place of Business:				New Principal Place of Business:		
5201 NW GENEVA WAY #102 MIAMI, FL 33166 US			SUITE 1	5201 NW GENEVA WAY SUITE 102 MIAMI, FL 33166 US		
Current Mailing Address:				New Mailing Address:		
P.O. BOX 6 MIAMI, FL						
FEI Number:	03-0413836	FEI Number Applied For ()	FEI Number Not A	pplicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
ADAMS, CHARLES C 5201 NW GENEVA WAY #102 MIAMI, FL 33166 US				ADAMS, CHARLES C 5201 NW GENEVA WAY SUITE 102 MIAMI, FL 33166 US		
The above in the State		ubmits this statement for the p	ourpose of changir	g its registe	ered office or registered agent, or both,	
SIGNATURE:				04/21/2005		
	Electron	ic Signature of Registered Age	ent		Date	
Election Can	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () GALVEZ, MAUR 9766 NW 49 TE MIAMI, FL 3317	RRACE	Title: Name: Address: City-St-Zi	o:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () ADAMS, CHARL 5201 GENEVA V MIAMI, FL 3317	VAY #102	Title: Name: Address: City-St-Zi	o:	()Change ()Addition	
Title: Name: Address:	V () RODRIGUEZ, N 2775 W. OKEEO		Title: Name: Address:		(X) Change () Addition UEZ, NOELQUIS V 49 TERRACE	

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.

City-St-Zip:

MIAMI, FL 33178

SIGNATURE: CHARLES C. ADAMS ST 04/21/2005