


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90510 032 ***150.00

DOCUMENT # P02000035941	
1. Entity Name ERNESTO GUERRA INTERIORS, INC	

Principal Place of Business 297 EAST 41 STREET HIALEAH, FLORIDA 33013	Mailing Address 297 EAST 41 STREET HIALEAH, FLORIDA 33013
--	--

2. Principal Place of Business SAME AS ABOVE	3. Mailing Address Suite, Apt. #, etc.
--	--

City & State	City & State
Zip	Country

4. FEI Number 81-0551715	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 ERNESTO GUERRA 297 EAST 41 STREET HIALEAH, FLORIDA 33013	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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATE
---	-------------

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PRESIDENT & DIRECTOR <input type="checkbox"/> Delete	NAME ERNESTO GUERRA	TITLE	NAME
STREET ADDRESS 297 EAST 41st STREET	CITY-ST-ZIP HIALEAH, FLORIDA 33013	STREET ADDRESS	CITY-ST-ZIP
TITLE TRASURER/SECRETARY/DIRECTOR <input type="checkbox"/> Delete	NAME YOSFLIN GUERRA	TITLE	NAME
STREET ADDRESS 262 EAST 41st STREET	CITY-ST-ZIP HIALEAH, FLORIDA 33013	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP	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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  ERNESTO GUERRA- PRESIDENT April 25th, 2005 (305) 827-6457	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #
--	---	-------------	------------------------