


FILED

Apr 29, 2004 08:00 AM
Secretary of State

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000040298 1. Entity Name BARREIRO'S D.M.E. & SERVICES, INC.	
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Principal Place of Business 1710 SW 27 AVE STE 203 MIAMI, FL 33145	Mailing Address 4148 WEST 9TH LANE HIALEAH, FL 33012
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DO NOT WRITE IN THIS SPACE



04242004 No Chg-P CR2E034 (10/03)

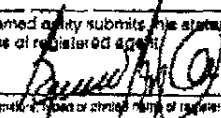
4. FEI Number 01-0684908	Accepted for Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PEREZ, RAMIRO J
145 MADEIRA AVENUE
SUITE 315
CORAL GABLES, FL 33134**

**DO NOT WRITE
IN THIS SPACE**

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: **4/29/04**

Report the names of current or former registered agents and date if applicable. (NOTE: Registered Agent signature required when resigning)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$350.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARREIRO, MARITZA 4148 WEST 9TH LANE HIALEAH, FL 33012
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U00000140935
04/29/04-80182-001 150.00

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:  DATE: **4-26-04**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR