## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000043911

## FILED Apr 23, 2004 8:00 am Secretary of State

1. Entity Name 4TOGO, CORPORATION				04-23-	2004 90256 047 ***150.00	
Principal Place of Business 2451 W 68 ST., BAY 5 HIALEAH, FL 33016		Mailing Address 15476 NW 77 CT. #619 HIALEAH, FL 33016		1 10 2 10 2 11 2 11 2 11 2 11 2 11 2 11	EDIS DO III DO III DISTO III DISTO III DISTO III DO III DISTO III DISTO III DISTO III DISTO III DISTO III DISTO	
2. Principal Place of Business		3. Mailing Address 685+BAYS				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02062004 Chg-P	CR2E034 (10/03)	
City & State		HIALFAH	FL	4. FEI Number 75-3052696	Applied For Not Applicable	
Zip	Country	330/6	DADE	5. Certificate of Status Des	Fee Hequired	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name() (10) (10) (10) (10) (10) (10) (10) (1						
MORROW & MILBERG, P.A. 499 NORTHWEST 70TH AVE. SUITE 108			Street Addres 2451	Street Address (P.O. Box Number is National Ceptable)		
PLANTATION, FL 33317				h,		
		<b>7</b> 8)	City	,	FL 3300/6	
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, 2004 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees						
10.	OFFICERS AND	Delete	11.	ADDITIONS/CHANGES II	O OFFICERS AND DIRECTORS IN 11  Change Addition	
NAME STREET ADDRESS CITY-ST-ZIP	,RODRIGUEZ, FRANCISCO J 15476 N.W. 77TH COURT, #619 MIAMI LAKES, FL 33016		NAME STREET ADDRESS CITY-ST-ZIP		,	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MARICHAL, OSVALDO 15476 N.W. 77TH COURT, #619 MIAMI LAKES, FL 33016	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MALDO MARIG 51 W 68 ST Aleah, FL 3	HAL Dehange Addition BAYS 30/6	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NARANJO, RENE 15476 N.W. 77TH COURT, #619 MIAMI LAKES, FL 33016		TITLE VIAME NAME STREET ADDRESS CITY-ST-ZIP	CE Président ne verent d 15, N 6857 Waleah, FL	Change Addition  BAY5  330/6	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAMIREZ, JOSE 15476 N.W. 77TH COURT, #619 MIAMI LAKES, FL 33016	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filling 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 an 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 of 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 oddress, with all other like empowered.  SIGNATURE:  SIGNATURE:  SIGNATURE:						
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Daylarine Phone #						

A THE STATE OF