## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 16, 2005 08:00 AM Secretary of State

ANNUAL REPURI					- TC	,-	. of C404
1. Entity Nam	MENT # P020000551	80			56	ecretary	of State
Principal Place 4700 N.W. 7 SUITE 9-5 MIAMI, FL 3		Mailing Address -4700 N.W. 7TH STREET -SUITE 9-5 MIAMI, FL 33126					#### <b>#####</b> ###########################
DO NOT WRITE IN THIS SPACE			CE	01242005 No Chg-P CR2E034 (10/03)  4. FEI Number			
	6. Name and Address of Current Re	istered Agent					
MELARA, MARCO M 4700 N.W. 7TH STREET SUITE 9-5 MIAMI, FL 33126			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.	Signature, typed or printed name of registered agent and	Rife if applicable. (NOTE, Registere	ed Agent signature requires	d when reinstating)	X 7	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing Youst Fund Contribution.				.00 May Be led to Fees			
10.	OFFICERS AND DIF	IECTORS	-				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MELARA, MARCO M 4700 N.W. 7TH STREET SUITE 9-6 MIAMI, FL 33126						
TITLE NAME STREET ADDRESS CITY - ST-ZIP					800000 03/16/05	02647 <b>1</b> 3 -80026-015	5 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		and the second s			NOT W	•	
TITLE NAME STREET ADDRESS CITY+ST-ZIP				IN '	THIS SF	PACE	
IITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY - ST- 7IP							

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.

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SIGNATURE:

MARCO MIMELARA PRES. DIRECTOR