

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000055654

Entity Name: STAND-ART, CORP

FILED  
Feb 13, 2004  
Secretary of State

## Current Principal Place of Business:

1820 N. CORPORATE LAKE BLVD.  
#202  
WESTON, FL 33326

## New Principal Place of Business:

## Current Mailing Address:

1820 N. CORPORATE LAKE BLVD.  
#202  
WESTON, FL 33326

## New Mailing Address:

FEI Number: 75-3063481

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEIRO, ADRIANA  
833 REGL COVE ROAD  
WESTON, FL 33327 US

## Name and Address of New Registered Agent:

LORENZO, JOSE E MR  
833 REGL COVE ROAD  
WESTON, FL 33327 US

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.

SIGNATURE: JOSE ENRIQUE LORENZO

02/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LEIRO, ADRIANA  
Address: 833 REGAL COVE RD.  
City-St-Zip: WESTON, FL 33327

Title: D ( ) Delete  
Name: SIFONTES, LUIS  
Address: 4462 DOGWOOD CIRCLE  
City-St-Zip: WESTON, FL 33327

Title: D ( ) Delete  
Name: EMRIQUE, LORENZO JOSE  
Address: 833 REGAL COVE RD.  
City-St-Zip: WESTON, FL 33327

Title: D (X) Delete  
Name: SIFONTES, MILDRED  
Address: 1820 N. CORPORATE LAKES BLVD. STE. 202  
City-St-Zip: WESTON, FL 33326

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: L & L CONSULTATS & I, NVESTMEMENT, C O RP.  
Address: 833 REGAL COVE RD.  
City-St-Zip: WESTON, FL 33327

Title: D (X) Change ( ) Addition  
Name: SIFONTES, LUIS A MR.  
Address: 3742 W. GARDENIA AVE.  
City-St-Zip: WESTON, FL 33332 US

Title: D (X) Change ( ) Addition  
Name: SIFONTES, MILDRED I MRS.  
Address: 3742 W. GARDENIA AVE.  
City-St-Zip: WESTON, FL 33332 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: LUIS A. SIFONTES

D

02/13/2004

Electronic Signature of Signing Officer or Director

Date