2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2004
Secretary of State

DOCUMENT# P02000063042

Entity Name: ARNALDO D.M.E. CORP.

Current Principal Place of Business:

175 FONTAINBLEU BLUD
2 G 3
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

175 FONTAINBLEU BLUD
2 G 3
MIAMI, FL 33172

New Mailing Address:

FEI Number: 02-0614795 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERNANDEZ, ARNALDO
175 FONTAINBLEAU BLVD
2G3
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

CAPOTE, YOHANY
175 FONTAINBLEAU BLVD
2G3
MIAMI, FL 33172 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: YOHANY CAPOTE 09/09/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPVS ( ) Delete
Name: HERNANDEZ, ARNALDO
Address: 175 FONTAINBLEAU BLVD 2G3
City-St-Zip: MIAMI, FL 33172

Title: T (X) Delete
Name: HERNANDEZ, ARNALDO
Address: 175 FONTAINBLEAU BLVD 2G3
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: CAPOTE, YOHANY
Address: 175 FONTAINBLEAU BLVD 2G3
City-St-Zip: MIAMI, FL 33172

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: YOHANY CAPOTE DPS 09/09/2004
Electronic Signature of Signing Officer or Director Date