2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2004
Secretary of State

DOCUMENT# P02000064698

Entity Name: ARTEAGA & ASSOCIATES INVESTMENT GROUP, INC.

Current Principal Place of Business:

259 NORTHEAST 116TH STREET
MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

259 NORTHEAST 116TH STREET
MIAMI, FL 33161

New Mailing Address:

FEI Number: 13-4217988 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARTEAGA, OLFRAN
259 NORTHEAST 116TH STREET
MIAMI, FL 33161 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ARTEAGA, OLFRAN
Address: 259 NORTHEAST 116TH STREET
City-St-Zip: MIAMI, FL 33161

Title: VD ( ) Delete
Name: ARTEAGA, JUAN F
Address: 9877 PINES BOULEVARD
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VD (X) Delete
Name: FUENTES, TIRSO R
Address: 32 CALLE 14-18 ZONA 11 LAS ARAUCARIAS DE
City-St-Zip: GUATEMALA, CA

Title: VD (X) Delete
Name: WONG, ANTONIO H
Address: 1701 NORTHEAST 5TH STREET, #205
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: OLFRAN ARTEAGA PD 02/18/2004

Electronic Signature of Signing Officer or Director — Date