

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071260

Entity Name: VILHENA, INC.

FILED  
May 01, 2004  
Secretary of State

**Current Principal Place of Business:**

1840-A LINTON LAKE DR  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

567603 ARBOR CLUB WAY  
BOCA RATON, FL 33433

**Current Mailing Address:**

1840-A LINTON LAKE DR  
DELRAY BEACH, FL 33445

**New Mailing Address:**

567603 ARBOR CLUB WAY  
BOCA RATON, FL 33433

FEI Number: 54-2067693

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALMEIDA, SUZANNE  
1840-A LINTON LAKE DR  
DELRAY BEACH, FL 33445

**Name and Address of New Registered Agent:**

ALMEIDA, SUZANNE V MS  
567603 ARBOR CLUB WAY  
BOCA RATON, FL 33433

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: SUZANNE ALMEIDA

05/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ALEIMDA, SUZANNE  
Address: 1840-A LINTON LAKE DR  
City-St-Zip: DELRAY BEACH, FL 33445

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: ALMEIDA, SUZANNE V MS  
Address: 567603 ARBOR CLUB WAY  
City-St-Zip: BOCA RATON, FL 33433

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: SUZANNE ALMEIDA

MS

05/01/2004

Electronic Signature of Signing Officer or Director

Date