



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2004 8:00 am
Secretary of State

02-20-2004 90002 018 ***150.00

DOCUMENT # P02000071763 1. Entity Name NARANJO CORPORATION																													
Principal Place of Business 18765 N.W. 89TH COURT HIALEAH, FL 33018			Mailing Address 18765 N.W. 89TH COURT HIALEAH, FL 33018																										
2. Principal Place of Business 11401 PINES BLVD.		3. Mailing Address		 01182004 Chg-P CR2E034 (10/03)																									
Suite, Apt. #, etc. STE # 484		Suite, Apt. #, etc.																											
City & State PEMBROKE PINES, FL		City & State																											
Zip 33026	Country BROWARD	Zip	Country																										
4. FEI Number 02-0622606				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent MERCHAN, BLANCHAN F 18765 N.W. 89TH COURT HIALEAH, FL 33018																									
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">P</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MERCHAN, BLANA F</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>18765 N.W. 89TH COURT</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>HIALEAH, FL 33018</td> <td></td> </tr> </table>			TITLE	P	<input type="checkbox"/> Delete	NAME	MERCHAN, BLANA F		STREET ADDRESS	18765 N.W. 89TH COURT		CITY-ST-ZIP	HIALEAH, FL 33018		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;"></td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #