


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000076156	
1. Entity Name VASQUEZ BUJ & ASSOCIATES, INC.	

Principal Place of Business 15136 SW 108 TERR MIAMI, FL 33196	Mailing Address 15136 SW 108 TERR MIAMI, FL 33196
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DO NOT WRITE IN THIS SPACE



01212004 No Chg-P CR2E034 (10/03)

4. FEI Number 41-2056916	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 VASQUEZ, AMAURY A 15645 SW 74 CIR DR #12 MIAMI, FL 33193	DO NOT WRITE IN THIS SPACE
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reestablishing)</small>	DATE _____
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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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VASQUEZ, AMAURY A 15136 SW 108 TERR MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BUJ VASQUEZ, MARIA 15136 SW 108 TERR MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VASQUEZ, VIVIAN 15136 SW 108 TERR MIAMI, FL 33196
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01/28/04-80077-008 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: 	AMAURY VASQUEZ, President 1/21/04
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>