


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Sep 10, 2004 8:00 am**  
**Secretary of State**

09-10-2004 90009 032 \*\*\*550.00

**DOCUMENT # P02000082565**  
 1. Entity Name  
**FLAGLER INVESTMENTS, INC.**



Principal Place of Business      Mailing Address  
**13985 SW 140TH ST.**      **13985 SW 140TH ST.**  
**MIAMI, FL 33186**      **MIAMI, FL 33186**

**24084770**



2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

08192004      Chg-P      CR2E034 (10/03)

City & State      City & State  
 Zip      Country      Zip      Country

4. FEI Number      Applied For  
**02-0636681**      Not Applicable  
 5. Certificate of Status Desired            **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**  
**REINER, SAMUEL B ESQ.**  
**9100 SOUTH DADELAND BLVD., STE. 1408**  
**MIAMI, FL 33156-7816**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>CRUZ, JAVIER</b>
STREET ADDRESS	<b>13985 SW 140TH ST.</b>
CITY-ST-ZIP	<b>MIAMI, FL 33186</b>
TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>DOMINGUEZ, HERNAN</b>
STREET ADDRESS	<b>13985 SW 140TH ST.</b>
CITY-ST-ZIP	<b>MIAMI, FL 33186</b>
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 all other like empowered.

**SIGNATURE:**       **3/30/04**      **786-229-3925**  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

ATTACHMENT 24084710  
# P02000082565

FLAGLER INVESTMENTS, INC.

Division Of Corporations  
P.O. Box 1500  
Tallahassee, Fl 32302-1500

9/30/04

Attached is the Annual Report and check for the fee. This noticed we received recently and so I am sending it to you now. If you have any questions, please do not hesitate to contact us.  
Thank you.

Sincerely,



Hernan C. Dominguez  
Flagler Investments, Inc.

13985 S.W. 140 STREET, MIAMI, FL 33186  
PHONE: 786-229-3925