

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000083651

FILED  
Apr 25, 2004  
Secretary of State

Entity Name: VEACONSA CORP.

## Current Principal Place of Business:

169 EAST FLAGLER, SUITE 1527  
MIAMI, FL 33131

## New Principal Place of Business:

8505 NW 68 ST  
MIAMI, FL 33166

## Current Mailing Address:

169 EAST FLAGLER, SUITE 1527  
MIAMI, FL 33131

## New Mailing Address:

5670 NW 113 PL  
MIAMI, FL 33178

FEI Number: 71-0900815

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMPSON, DISNEY D  
169 EAST FLAGLER, SUITE 1527  
MIAMI, FL 33131

## Name and Address of New Registered Agent:

LA RIVA, EDITH E  
5670 NW 113 PL  
MIAMI, FL 33178

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: EDITH LA RIVA E.

04/25/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BORRERO, VIRGILIO R  
Address: 169 EAST FLAGLER, SUITE 1527  
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete  
Name: ECHENAGUCIA, EDITH R  
Address: 169 EAST FLAGLER, SUITE 1527  
City-St-Zip: MIAMI, FL 33131

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: RUIZ, VIRGILIO A  
Address: 8505 NW 68 ST  
City-St-Zip: MIAMI, FL 33166

Title: D (X) Change ( ) Addition  
Name: LA RIVA, EDITH E  
Address: 8505 NW 68 ST  
City-St-Zip: MIAMI, FL 33131

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: EDITH LA RIVA E.

D

04/25/2004

Electronic Signature of Signing Officer or Director

Date