

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000086009

Entity Name: LAT CAPITAL SOLUTIONS, INC.

FILED  
Jan 27, 2004  
Secretary of State

**Current Principal Place of Business:**

5201 BLUE LAGOON DR  
823  
MIAMI, FL 33126

**New Principal Place of Business:**

5201 BLUE LAGOON DR  
823  
MIAMI, FL 33126

**Current Mailing Address:****New Mailing Address:**

FEI Number: 42-1546911      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PRESIDENTIAL SERVICES INCORPORATED  
1217 CAPE CORAL PKWY  
CAPE CORAL, FL 339049604 US

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

DIAZ, LUIS E  
5201 BLUE LAGOON DRIVE  
#823  
MIAMI, FL 33126 US

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: LUIS E DIAZ

01/27/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).****OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DIAZ, LUIS  
Address: 5201 BLUE LAGOON DR  
City-St-Zip: MIAMI, FL 33126

Title: ST ( ) Delete  
Name: VASQUEZ, ALEJANDRINA  
Address: 5201 BLUE LAGOON DR  
City-St-Zip: MIAMI, FL 33126

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: VASQUEZ, MARIA A  
Address: 5201 BLUE LAGOON DR  
City-St-Zip: MIAMI, FL 33126

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 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: MARIA A VASQUEZ

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01/27/2004

Electronic Signature of Signing Officer or Director

Date