2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Sep 23, 2004 8:00 am Secretary of State 09-23-2004 90002 028 ***158.75

Principal Place of Business 1555 WEST 44 PL 338 MIAMI, FL 33176 2. Principal Place of Business 2 ROOL N.E. 1 R3 ST Suite. Apr. 4, etc. 2. Principal Place of Business 2 ROOL N.E. 1 R3 ST Suite. Apr. 4, etc. 3 Suite. Apr. 4, etc. 4. PEI Number 10.5 Gly & State 5. Country 5. C
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AUCHTUCH, The August Town of Country 104-3718660 Not Applicable 20
6. Name and Address of Current Registered Agent KONDLA, RICHARD F 9555 SW 88 ST STE 201 MIAMI, FL 33176 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 FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 9. Election Campaign Financing Trust Fund Contribution. NOTE: Registered Agent (approximately agent agent and title if applicable in the obligations of receive the prince name of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the prince of registered agent, or both, in the State of Florida. I am familiar with, and accept the prince of registered agent, or both, in the State of Florida. I am familiar with, and accept the prince of registered agent, or both, in the State of Florida. I am familiar with, and accept the prince of registered agent, or both, in the State of Florida. I am famili
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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:
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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 Signature. hyperfor period name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reincialing) FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 9. Election Campaign Financing Trust Fund Contribution. Added to Fees and Directors with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PSD TINOCO, MARIA STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE Delete TITLE Delete TITLE Delete TITLE Change Addition Addition Change Addition Change Addition Change Addition
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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
indicated on this proportion supplemental reports true and accurate and that my signature shall have the same legal effect as it made under oath; that it 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.
912/1
SIGNATURE: // Oru / 305 494-9832