

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000089387

Entity Name: FUTURE INVESTORS CORP.

FILED
Jan 08, 2004
Secretary of State

Current Principal Place of Business:

2902 NW 27TH AVENUE
MIAMI, FL 33142

New Principal Place of Business:

PO BOX 601074
NO MIAMI, FL 33160

Current Mailing Address:

2902 NW 27TH AVENUE
MIAMI, FL 33142

New Mailing Address:

PO BOX 601074
NO MIAMI, FL 33160

FEI Number: 35-2176244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELERO, ANTONIO
2960 NE 164TH STREET
NORTH MIAMI BEACH, FL 33160 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MELERO, ILEANA M
Address: 2960 NE 164TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: VSD () Delete
Name: MELERO, ANTONIO
Address: 2960 NE 164TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANTONIO MELERO

VSD

01/08/2004

Electronic Signature of Signing Officer or Director

_____ Date