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Secretary of State
05-04-2004 90123 026 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

66428670

DOCUMENT # P02000090767

1. Entity Name
ELECTRODOORS CORPORATION

Principal Place of Business	Mailing Address
19390 COLLINS AVENUE SUITE 524-A AVENTURA, FL 33160	19390 COLLINS AVENUE SUITE 524-A AVENTURA, FL 33160

04292004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
18925-1 Atlantic Blvd	NEW ADDRESS 18925-1 Atlantic Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State Miami - Florida	City & State Miami - Florida.
Zip 33160	Country Aventura
	Zip 33160
	Country Aventura.

4. FEI Number
42-1558836
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ABRAMSON, EDWARD J ESQ. 7270 NW 1TH STREET SUITE 580 MIAMI, FL 33126	Name ABRAMSON, Edward J. ESQ. Street Address (P.O. Box Number is Not Acceptable) 7270 NW 1th Street Suite 580 City Miami, FL FL Zip Code 33126

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: Hector H. Munoz 4/21/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when adding) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MUNOZ, HECTOR H 19390 COLLINS AVENUE AVENTURA, FL 33160 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Munoz Hector H. 18925-1 Atlantic Blvd. Aventura, FL 33160 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GUTIERREZ, LILIANA M 19390 COLLINS AVENUE AVENTURA, FL 33160 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Gutierrez, liliana M. 18925-1 Atlantic Blvd. Aventura FL 33160 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RESTREPO, PIEDAD 19390 COLLINS AVENUE AVENTURA, FL 33160 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Restrepo piedad 18925-1 Atlantic Blvd. Aventura FL 33160 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Hector Munoz Hector H. Munoz 4/21/04 305 937 49 59
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
305 302 2329