

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000094978

**FILED**  
**Aug 07, 2005**  
**Secretary of State**

**Entity Name:** THE NAZCA GROUP CORPORATION

**Current Principal Place of Business:**

785 WEST 50 TH ST  
101  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

215 SW 42 ND AVENUE  
911  
MIAMI, FL 33134

**Current Mailing Address:**

785 WEST 50 TH ST  
MIAMI BEACH, FL 33140

**New Mailing Address:**

215 SW 42 ND AVENUE  
911  
MIAMI, FL 33134

**FEI Number:** 51-0427417

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SERGIO, DURAND  
785 WEST 50 TH ST  
MIAMI BEACH, FL 33140 US

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

SERGIO, DURAND  
215 SW 42 ND AVENUE  
911  
MIAMI, FL 33134 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: SD

08/07/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DURAND, SERGIO  
Address: 785 WEST 50TH ST.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete  
Name: ENRIQUETA, MEJIA M  
Address: 785 WEST 50 TH ST  
City-St-Zip: MIAMI BEACH, FL 33140

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

Title: P (X) Change ( ) Addition  
Name: DURAND, SERGIO  
Address: 215 SW 42 ND AVENUE  
City-St-Zip: MIAMI, FL 33134

Title: D (X) Change ( ) Addition  
Name: ENRIQUETA, MEJIA M  
Address: 215 SW 42 ND AVENUE  
City-St-Zip: MIAMI, FL 33134

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: SD

P

08/07/2005

Electronic Signature of Signing Officer or Director

Date