
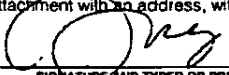


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 31, 2004 8:00 am
Secretary of State

03-18-2004 90049 043 ***150.00

DOCUMENT # P02000100235 1. Entity Name 1 ALEPH INTERNATIONAL DESIGNERS, INC.					
Principal Place of Business 17081 S.W. 137 PLACE MIAMI FL 33177			Mailing Address 17081 S.W. 137 PLACE MIAMI FL 33177		
2. Principal Place of Business 2314 Cypress Bend Dr S		3. Mailing Address 2314 Cypress Bend Dr S			
Suite, Apt. #, etc. APT # 612		Suite, Apt. #, etc. APT # 612			
City & State POMPANO BEACH, FL		City & State POMPANO BEACH, FL			
Zip 33069		Country US		Zip 33069	
Country US		4. FEI Number AP-PLIED FOR			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MARRERO, JOSE C ESQ. 1820 N. CORPORATE LAKES BLVD., SUITE #105 WESTON FL 33326			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P NAME TRUJILLO, LISELOTTE STREET ADDRESS 17081 S.W. 137 PLACE CITY-ST-ZIP MIAMI FL 33177	<input type="checkbox"/> Delete		TITLE P NAME 1 ALEPH INTERNATIONAL DESIGNERS STREET ADDRESS 2314 CYPRESS BEND DR S # 612 CITY-ST-ZIP POMPANO BEACH, FL, 33069	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE S NAME CONTRERAS ALARCON, JULIO F STREET ADDRESS 17081 S.W. 137 PLACE CITY-ST-ZIP MIAMI FL 33177	<input type="checkbox"/> Delete		TITLE S NAME 1 ALEPH INTERNATIONAL DESIGNER STREET ADDRESS 2314 CYPRESS BEND DR S # 612 CITY-ST-ZIP POMPANO BEACH, FL, 33069	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 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:  LISELOTTE TRUJILLO <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			03/11/04 786-486-8949 <small>Date Daytime Phone #</small>		

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999

attachment
DATE OF THIS NOTICE: 09-24-2002
NUMBER OF THIS NOTICE: CP 575 A
EMPLOYER IDENTIFICATION NUMBER: 35-2181095
FORM: SS-4
0232736493 B

66408750
P02000100235

FOR ASSISTANCE CALL US AT:
1-800-829-1040

1 ALEPH INTERNATIONAL DESIGNERS INC
17081 SW 137TH PL
MIAMI FL 33177

OR WRITE TO THE ADDRESS
SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 35-2181095. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing and incorrect information in your account. It also could cause you to be assigned more than one EIN.

Based on the information shown on your Form SS-4, you must file the following forms(s) by the date we show.

Form 1120

03/15/2003

Your assigned tax classification is based on information obtained from your Form SS-4. It is not a legal determination of your tax classification and is not binding on the IRS. If you want a determination on your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Rev. Proc. 98-01, 1998-1 I.R.B. 7 (or the superceding revenue procedure for the year at issue).

If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

If you have questions about the forms shown or the date they are due, you may call us at 1-800-829-1040 or write to us at the address shown above.

If you're required to deposit for employment taxes (Forms 941, 943, 940, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), we will send an initial supply of Federal Tax Deposit (FTD) coupon books within six weeks. You can use the enclosed coupons if you need to make a deposit before you receive your supply.