

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108268

FILED
Apr 29, 2004
Secretary of State

Entity Name: MACANUDO IMPORTS & EXPORTS, INC

Current Principal Place of Business:

17801 NW 84 COURT
MIAMI LAKES, FL 33015

New Principal Place of Business:

Current Mailing Address:

17801 NW 84 COURT
MIAMI LAKES, FL 33015

New Mailing Address:

FEI Number: 16-1628099

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMUEL, VELEZ
17801 NW 84 COURT
MIAMI, FL 33015 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: VELEZ, SAMUEL
Address: 17801 NW 84 COURT
City-St-Zip: HIALEAH, FL 33015

Title: VP () Delete
Name: GOITIA, RUBEN AGUSTIN
Address: FRUTOS 2849 SANTO TOME
City-St-Zip: SANFE, AR ARGENTINA 30

Title: T,S () Delete
Name: VELEZ, ANN CAROLYN
Address: 17801 NW 84 COURT
City-St-Zip: HIALEAH, FL 33015

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D () Change (X) Addition
Name: VELEZ-SUAREZ, ISRAEL
Address: 17904 NW 78 PLACE
City-St-Zip: HIALEAH, FL 33015

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: ANN CAROLYN VELEZ

T,S

04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date