

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000115420

FILED
Feb 21, 2004
Secretary of State

Entity Name: MORALES FINANCIAL SERVICES, INC

Current Principal Place of Business:

5201 BLUE LAGOON DRIVE
SUITE 809
MIAMI, FL 33126 US

Current Mailing Address:

5201 BLUE LAGOON DRIV
SUITE 809
MIAMI, FL 33126 US

New Principal Place of Business:

5201 BLUE LAGOON DRIVE
SUITE 977
MIAMI, FL 33126 US

New Mailing Address:

5201 BLUE LAGOON DRIV
SUITE 977
MIAMI, FL 33126 US

FEI Number: 38-3663458

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORALES, MARIA
5600 NW 114 PLACE
SUITE 210
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

MORALES, MARIA
10890 NW 51 LANE
MIAMI, FL 33178 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: MARIA MORALES

02/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORALES, MARIA
Address: 5600 NW 114 PLACE SUITE 210
City-St-Zip: MIAMI, FL 33178 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORALES, MARIA
Address: 10890 NW 51 LANE
City-St-Zip: MIAMI, FL 33178 US

Title: VP () Change (X) Addition
Name: LOPEZ, LUCILA
Address: 10890 NW 51 LANE
City-St-Zip: MIAMI, FL 33178 US

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: MARIA MORALES

P

02/21/2004

Electronic Signature of Signing Officer or Director

Date