2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000122856

Entity Name: CODIUSA, INC.

Current Mailing Address:

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1225 OKEECHOBEE RD #3A 1750 WEST 56 STREET HIALEAH, FL 33010

APT. # 202 HIALEAH, FL 33012

New Mailing Address:

1225 OKEECHOBEE RD #3A 1750 WEST 56 STREET HIALEAH, FL 33010 APT. # 202

HIALEAH, FL 33012

FEI Number: 55-0807272 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BELTRAN, CARLOS A BELTRAN, CARLOS A 1225 W. OKEECHOBEE RD #3A 1750 WEST 56 STREET APT. # 202 HIALEAH, FL 33010

HIALEAH, FL 33012 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: CAR;OS A. BELTRAN 04/30/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: () Delete Title: (X) Change () Addition

BELTRAN, CARLOS A BELTRAN, CARLOS A Name: Name: 1225 W. OKEECHOBEE RD #3A 1750 WEST 56 STREET APT. # 202 Address: Address:

City-St-Zip: HIALEAH, FL 33010 City-St-Zip: HIALEAH, FL 33012

Title: PD () Delete Title: PD (X) Change () Addition

ORDOÑES, MARIA C ORDONES, MARIA C Name: Name:

1225 W. OKEECHOBEE RD #3A Address: 1750 WEST 56 STREET APT. # 202 Address:

HIALEAH, FL 33010 HIALEAH, FL 33012 City-St-Zip: City-St-Zip:

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: CARLOS A. BELTRAN PD 04/30/2005