## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000124225  1. Entity Name AMNIA INVESTMENT INC.				O4 MAR 22 PM 12: 33					
Principal Place of Business Malling Address  ù ( uêæ÷¢, çesul ÷èu uuðanatoou ) ÷è ÷à úçè ù ( uèæ÷éç çesul ÷èu uuðanasoot ) ÷è ÷à ú¢è  -ðōo ùeæn ÷ōō uæ÷ öðè ;ðōo uegna àð uæ÷ öðe  i ou é oð									
2. Principal Place of Business 2655 LeJune Rd. Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.					03172004				
City & State Cables, Fl City & State					4. FEI Number Applied For Not Applied For Not Applied For				
Zip Country Zip Country					5. Certificate of Status Desired \$8.75 Additional Fee Required 7. Name and Address of New Registered Agent				
6. Name and Address of Current Registered Agent GALVEZ-PRIEGO, JORGE 888 BRICKELL AVE 5 FLR MIAMI, FL 33131				Name Juan Vicente Urdaneta  Street Address (P.O. Box Number is Not Acceptable)  2655 Le June Road					
					# 507 Cocal Cables FL 33934				
8. The above named entity Juborits this statement for the primpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both in the State of Florida. I am familiar with accept the obligations of registered agent, or both in the State of Florida.									
FILE NOW!!! FER IS \$150.00 After May 1, 2004 Fee will be \$550.00  S. Election Campaign Financing \$5.00 May Be Added to Fees									
10.	OFFICERS AND D	RECTORS	11.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS,	/CHANGES TO	OFFICERS AND	DIRECTORS IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	D CHACIN DE LANDER, AMNIA 888 BRICKELL AVE 5 FLR MIAMI, FL 33131	☐ Delete	TITLE NAME STREET AL CITY-ST-	174	55 Le (a) Go	June ables	Rd, #	Addition Addition 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANDER, MANUEL F 888 BRICKELL AVE 5 FLR MIAMI, FL 33131	☐ Delete	TITLE NAME STREET AL	1/1	,55 L	e Jug ables	ae R	Change Addition  33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANDER, CARLOS A 888 BRICKELL AVE 5 FLR MIAMI, FL 33131	☐ Delete	TITLE NAME STREET AI CITY-ST-	DORESS 24	_ \	e Ju,	ne (h)	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE TORRES, MARIAS A 888 BRICKELL AVE 5 FLR MIAMI, FL 33131	☐ Delate	TITLE NAME STREET AI CITY-ST-	173	255 L	eJur eshler	re Rd	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE VILLUENDAS, ANNIA 888 BRICKELL AVE 5 FLR MIAMI, FL 33131	☐ Delete	TITLE NAME STREET A	/ /	,55 L ,oral (	e Jun Sables	e Rd,	Addition Addition 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A CITY-ST-	1	41 04/08	0003; 9/04010	18059 110011	57-4 **158.75	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section (19.0/3)(), 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 efficiency and 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 Unapter 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.									