

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125626

Entity Name: OGCPUS, INC.

FILED
May 01, 2004
Secretary of State

Current Principal Place of Business:

782 NW LE JEUNE RD, SUITE 439
MIAMI, FL

New Principal Place of Business:

Current Mailing Address:

782 NW LE JEUNE RD, SUITE 439
MIAMI, FL

New Mailing Address:

FEI Number: 42-1564710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUZ, ALEJANDRINA G
782 NW LE JEUNE RD, SUITE 439
MIAMI, FL

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: D () Delete
Name: SANCHEZ, MANUEL
Address: 782 NW LE JEUNE RD, SUITE 439
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: OBREGON, MARIA
Address: 782 NW LE JEUNE RD, SUITE 439
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: ORTA, ALICIA
Address: 782 NW LE JEUNE RD, SUITE 439
City-St-Zip: MIAMI, FL 33146

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:

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: ALICIA ORTA

D

05/01/2004

Electronic Signature of Signing Officer or Director

Date