

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000127079

FILED
Apr 17, 2004
Secretary of State

Entity Name: CORBE, INC.

Current Principal Place of Business:

6440 NW 114TH AVE.
434
MIAMI, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

6440 NW 114TH AVE.
434
MIAMI, FL 33178 US

New Mailing Address:

FEI Number: 81-0589601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORZO, FERNANDO
6440 NW 114TH AVE.
434
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

ROA, JEFFREY
6440 NW 114TH AVE.
434
DORAL, 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: JEFFREY ROA

04/17/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CORZO, FERNANDO
Address: 6440 NW 114 AVE. #434
City-St-Zip: MIAMI, FL 33178 US

Title: S () Delete
Name: BERNAL DE CORSO, MARIA VICTORIA
Address: 6440 NW 114 AVE. #434
City-St-Zip: MIAMI, FL 33178 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: FERNANDO CORZO

P

04/17/2004

Electronic Signature of Signing Officer or Director

Date