2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

ATURE AND TYPED OR P

INTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Aug 02, 2004 8:00 am Secretary of State **DOCUMENT # P03000001043** 08-02-2004 90007 035 ***158.75 ANHERMA CORP. Principal Place of Business Mailing Address 696 BALD CYPRESS ROAD 696 BALD CYPRESS ROAD 54066066 WESTON, FL 33327 WESTON, FL 33327 2. Principal Place of Business 3. Mailing Address <u>3955 ADRA AVE</u> Suite, Apt. #, etc. Suite Apt. #, etc 07272004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Not Applicable <u>MIAMI, FL</u> 11-3671002 Zin Country Country \$8.75 Additional 5. Certificate of Status Desired 33178 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PRATS, GABRIEL 2121 PONCE DE LEON BLVD. Street Address (P.O. Box Number is Not Acceptable) **SUITE 240** CORAL GABLES, FL 33134 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution. Due by September 8, 2004 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE X Change Addition PD BECERRA, HERNANDO J NAME BECERRA, HERNANDO J. 3955 ADRA AVE. NAME STREET ADDRESS 2121 PONCE DE LEON BLVD SUITE 240 STREET ADDRESS MIAMI, FL. 33178 CiTY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition BECERRA, ANDRES NAME NAME BECERRA, ANDRES STREET ADDRESS 2121 PONCE DE LEON BLVD SUITE 240 3955 ADŔA. AVE. STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-ZIF MIAMI. FL. 33178 TITLE VTD ☐ Delete TITLE Change ☐ Addition TD NAME BECERRA, ALICIA NAME BECERRA, ALICIA 2121 PONCE DE LEON BLVD SUITE 240 STREET ADDRESS STREET ADDRESS 3955 ADRA AVE CITY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-ZIP MIAMI. FL. TITLE ☐ Delete TITLE VPD Change Addition NAME NAME BECERRA, MARIA I. 3955 ADRA AVE. MIAMI, FL. 33178 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change X Addition BECERRA, HERNANDO 3955 ADRA AVE. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MIAMI, FL. 33178 TITLE ☐ Delete ☐ Change TITLE ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supply mental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the received or trustee empowered to execute this report as required by Chapter 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.

FILED

Httachment 54066066 Dr. # \$03000001043

ANHERMA CORP. 3955 Adra Avenue Miami, Fl. 33178

July 27, 2004

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, Fl 32302-1500

To whom it may concern:

Our Accountants have checked the records at the Division of Corporations and found that the 2004 Uniform Business Report (U.B.R) for our company has not been filed.

According to our records we didn't received the 2004 U.B.R form. Enclosed is a completed 2004 U.B.R. and a check for \$158.75. We hereby request an abatement of the filling late penalties.

If you have any questions, please call our accountants Prats Fernandez & Co. at Tel: (305) 444-8333.

Sincerely,

ANHERMA CORP.