

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000014483 *1. Entity Name PETRA INVESTMENTS INTERNATIONAL CORP	
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FILED

05 JAN 18 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 9247 NW 54 STREET MIAMI, FL 33166 US	Mailing Address 155 TALLEVAST ROAD L9342 SARASOTA, FL 34243 US
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2. Principal Place of Business 8345 NW 66th ST Suite, Apt. #, etc. # 7077	3. Mailing Address 8345 NW 66th ST Suite, Apt. #, etc. # 7077
City & State MIAMI FLORIDA	City & State MIAMI FLORIDA
Zip 33166	Zip 33166
Country USA	Country USA


 01132005 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent ELLIS, TONYA 2222 VAN BUREN STREET #19 HOLLYWOOD, FL 33020	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right; font-weight: bold; font-size: 1.2em;">FL</div> Zip Code
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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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PAUL, TERRY 1455 TALLEVEST ROAD, L9342 SARASOTA, FL 34243	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PAUL, TERRY 1901 60 th PI. SUITE L 9342 BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAMS, JIM 10029 SW 223 LANE MIAMI, FL 33190	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DUNBAR, L CALVIN 17200 N.W. 16 AVE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RUSSELL, ALPIN 7247 NW 54 STREET MIAMI, FL 33166	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLIAMS, JIM 10029 SW 223 LANE MIAMI, FL 33190
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	I THURSTON STANLEY 1811 NW 51 st Apt 883 FORT LAUDERDALE, FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing 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 supplemental 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 receiver 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.

SIGNATURE: _____ (786) 302 0644 (C)
 _____ Date: 01-18-05 Daytime Phone #: (954) 364 8110