
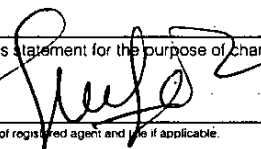
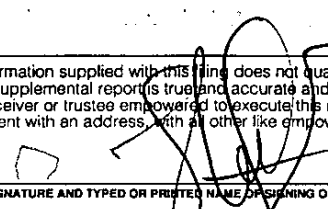


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005 8:00 am
Secretary of State

04-15-2005 90065 037 ***150.00

DOCUMENT # P03000015628			
1. Entity Name NURIA ENTERPRISES, INC.			
Principal Place of Business 13241 SW 265 STREET MIAMI, FL 33032		Mailing Address 13241 SW 265 STREET MIAMI, FL 33032	
2. Principal Place of Business 15241 SW 302 Street		3. Mailing Address 15241 SW 302 Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Homestead, FLA		City & State Homestead, FLA	
Zip 33033	Country USA	Zip 33033	Country USA
4. FEI Number 16-1653521		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALFONSO C ARMEN 12307 SW 130 STREET MIAMI, FL 33186		7. Name and Address of New Registered Agent Name: Hernandez, Jorge Luis Street Address (P.O. Box Number is Not Acceptable): 15241 SW 302 Street City: Homestead FL Zip Code: 33033	
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 reinstating) 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	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: P NAME: HERNANDEZ, JORGE L STREET ADDRESS: 13241 SW 265 STREET CITY-ST-ZIP: MIAMI, FL- 33032	<input type="checkbox"/> Delete	TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME: Hernandez, Jorge Luis STREET ADDRESS: 15241 SW 302 STREET CITY-ST-ZIP: Homestead, FLA 33033	
TITLE: VP NAME: VENTURA, NURIA A STREET ADDRESS: 13241 SW 265 STREET CITY-ST-ZIP: MIAMI, FL- 33032	<input type="checkbox"/> Delete	TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME: Ventura, Nuria A STREET ADDRESS: 15241 SW 302 STREET CITY-ST-ZIP: Homestead, FLA 33033	
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: 		Date: 4/11/05 Daytime Phone #: (305) 246-3843	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			