2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

P. ROBERT VALDES

SIGNATURE: _

Apr 29, 2004 8:00 am Secretary of State **DOCUMENT # P03000015940** 04-29-2004 90225 015 ***150.00 1. Entity Name P.R.V. ENGINEERING INC. MINIONS EST PER Principal Place of Business Mailing Address 2310 SW 26TH ST. 2310 SW 26TH ST. 94071386 MIAMI, FL 33133 MIAMI, FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272004 Cha-P CR2E034 (10/03) City & State City & State 4. EEI Number Applied For 56-2324965 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired_ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name VALDES, P. ROBERT Street Address (P.O. Box Number is Not Acceptable) 2310 SW 26TH ST. MIAMI, FL 33133 19.95 City Zip Code *** FL 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. WARNER 35133 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition VALDES, P. ROBERT 2310 SW 26TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33133" 4.3 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Change ☐ Addition TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of 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