

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000035229

Entity Name: ANAYA PROCESSING INC.

FILED
May 25, 2005
Secretary of State

Current Principal Place of Business:

7380 NW 35 TH TERRACE
MIAMI, FL 33122

New Principal Place of Business:

15327 NW 60TH AVE
SUITE #220
MIAMI LAKES, FL 33014

Current Mailing Address:

18867 NW 63 CT. CIR.
MIAMI, FL 33015

New Mailing Address:

FEI Number: 76-0732532 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEMMINGS, ASTRID
18867 NW 63 CT CIR
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FLEMMINGS, ASTRID
Address: 18867 N.W 63 CT.
City-St-Zip: MIAMI, FL 33015 US

Title: V () Delete
Name: FLEMMINGS, REYNALDO
Address: 18867 N.W. 63 CT
City-St-Zip: MIAMI, FL 33015 US

Title: D () Delete
Name: CORREA, CARLOS A
Address: 12304 SW 10TH ST BLDG # 22
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: FLEMMINGS, REYNALDO
Address: 18867 N.W. 63 CT
City-St-Zip: MIAMI, FL 33015 US

Title: D (X) Change () Addition
Name: DOLEO, MICHELLE M
Address: 18867 NW 63 CT CIR
City-St-Zip: MIAMI, FL 33015 US

Title: S () Change (X) Addition
Name: DOLEO, YHOSEIN
Address: 18867 NW 63 CT CIR
City-St-Zip: MIAMI, FL 33015

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: ASTRID FLEMMINGS

P

05/25/2005

Electronic Signature of Signing Officer or Director

_____ Date