

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000036703

FILED
Apr 14, 2004
Secretary of State

Entity Name: BINA VEN BUSINESS GROUP, CORP

Current Principal Place of Business:

4995 N.W. 72ND AVE.
SUITE 205
MIAMI, FL 33166

New Principal Place of Business:

400 S DIXIE HIGHWAY
CORAL GABLES, FL 33164

Current Mailing Address:

4995 N.W. 72ND AVE.
SUITE 205
MIAMI, FL 33166

New Mailing Address:

400 S DIXIE HIGHWAY
CORAL GABLES, FL 33164

FEI Number: 20-0048020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORES, CARMEN R
4995 N.W. 72ND AVE.
SUITE 205
MIAMI, FL 33166

Name and Address of New Registered Agent:

RAMIREZ, CARMEN D
400 S DIXIE HIGHWAY
CORAL GABLES, FL 33164

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: CARMEN DOLORES RAMIREZ FLORES

04/14/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FLORES, CARMEN R
Address: 4995 N.W. 72ND AVE. #205
City-St-Zip: MIAMI, FL 33166

Title: VD () Delete
Name: HERNANDEZ, LEVI C
Address: 4995 N.W. 72ND AVE. #205
City-St-Zip: MIAMI, FL 33166

Title: TD () Delete
Name: ROMERO, DAVID T
Address: 4995 N.W. 72ND AVE. #205
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RAMIREZ, CARMEN D
Address: 400 S DIXIE HIGHWAY
City-St-Zip: CORAL GABLES, FL 33164

Title: VD (X) Change () Addition
Name: CHOCRON, LEVI
Address: 400 S DIXIE HIGHWAY
City-St-Zip: CORAL GABLES, FL 33164

Title: TD (X) Change () Addition
Name: TORRES, DAVID
Address: 400 S DIXIE HIGHWAY
City-St-Zip: CORAL GABLES, FL 33164

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: CARMEN DOLORES RAMIREZ FLORES

PD

04/14/2004

Electronic Signature of Signing Officer or Director

Date