2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2004 8:00 am Secretary of State

1. Entity Name	MENT # P03000039 LE TIME, INC.	9758					04-12-20	004 90250			
Principal Place		Mailing Address							34	υουιο	
4315 NW 7TH Suite 51	H STREET	4315 NW 7TH STREET SUITE 51								-	
MIAMI, FL 33	3126	MIAMI, FL 33126									
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				03132004	Chg-P	CR2E0	34 (10/03)	,	
City & State		City & State			4. FEI Number 81-06066			•		plied For t Applicable	
Zip -	Country	Zip	Coun	try ~		5. Certificate	of Status Desired		\$8.75 Add Fee Required		
٠	6. Name and Address of Current	Registered Agent		Name		=7.=Name and	Address of Nev	v Registered	Agent a	<u> </u>	
VILORIA, FADHELY					Viloria Fadhedly						
	NAN AVE. #17			Street Ad 1525	Street Address (P.O. Box Number is Not Acceptable) 1525 Pennsylvania Ave. #5						
אבוטר זואוא וואר	AGH, FL 33139 -					each, Fl					
				Ciliniami beach				FL	- Zip Cod	39	
	named entity submits this statement f	or the purpose of changing its	s register				h, in the State of	Florida, Lam	familiar with,	and accept	
	1-1-	Fac	dhe1y	VILOR	RIA			03/19/	/04		
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NO	TE: Registere	d Agent signatur	re required	when reinstating)		DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550	9. Election Campa Trust Fund Con				00 May Be ed to Fees				. 1	
After Ma	ay 1, 2004 Fee will be \$550 OFFICERS AND	.00 Trust Fund Con	ntribution.			ed to Fees	CHANGES TO C	OFFICERS AN			
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indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 FADHELY VILORY

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR