

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000043317

Entity Name: ABSOLUT VENTURES, INC.

FILED
Jun 01, 2005
Secretary of State

Current Principal Place of Business:

8004 NW 154 ST #255
MIAMI LAKES, FL 33016

New Principal Place of Business:

3636 SW 9 STREET
APT #33
MIAMI, FL 33135

Current Mailing Address:

8004 NW 154 ST #255
MIAMI LAKES, FL 33016

New Mailing Address:

3636 SW 9 STREET
APT #33
MIAMI, FL 33135

FEI Number: 11-3685480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEREZ, DAVID T ESQ
7590 NW 186 ST, STE 206
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

INOA, FELIPE
1400 NW 107 AVE
MIAMI, FL 33172 US

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: FELIPE INOA

06/01/2005

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: D () Delete
Name: PEREZ, MIGUEL A
Address: 8004 NW 154 ST #255
City-St-Zip: MIAMI LAKES, FL 33016

Title: D (X) Delete
Name: INOA, FELIPE
Address: 8004 NW 154 ST #255
City-St-Zip: MIAMI LAKES, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: INOA, FELIPE
Address: 3636 SW 9 STREET #33
City-St-Zip: MIAMI, FL 33135

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

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: FELIPE INOA

D

06/01/2005

Electronic Signature of Signing Officer or Director

Date