

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)


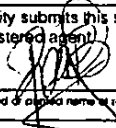

FILED
Aug 22, 2005 8:00 am
Secretary of State

07-28-2005 90002 026 ***150.00

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1st MOORE CR2E034 (10/04)

DOCUMENT # P03000044889					
1. Entity Name XENEIZES, INC.					
Principal Place of Business 21463 NE 2DA AVENIDA MIAMI FL 33169 US			Mailing Address 21463 NE 2DA AVENIDA MIAMI FL 33169 US		
2. Principal Place of Business 21463-NW 2ND AVE Suite, Apt. #, etc. MIAMI FLORIDA City & State			3. Mailing Address 21463 NW 2ND AVE. Suite, Apt. #, etc. MIAMI FLORIDA City & State		
Zip 33169	Country USA	Zip 33169	Country USA	4. FEI Number 32-0073267 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent BARBOZA-CEBALLOS, ROMINA 21463 NW 2ND AVE. MIAMI FL 33169			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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. SIGNATURE  DATE 8-10-5 (NOTE: Registered Agent signature required when re-registering)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARBOZA-CEBALLOS, ROMINA 1301 NE MIAMI GARDEN DRIVE APT# 224W NORTH MIAMI BEACH FL 33179 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CEBALLOS, DIEGO 1301 NE MIAMI GARDEN DRIVE APT# 224W NORTH MIAMI BEACH FL 33179 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 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 any address, with all other like empowered.					
SIGNATURE:  ROMINA BARBOZA P. 7-22-5 3059374366 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

ATTACHMENT

POB 000044889

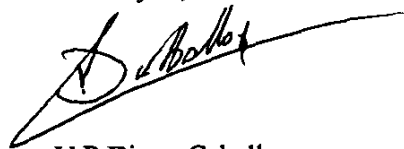
August 18, 2005

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To Whom It May Concern:

The reason I sent a check for \$150.00 is because unfortunately I never received the annual report notice. The annual report notice I received stated that after May 1, 2005 FEE WILL BE \$550.00 but I received the annual report in July and sent the check the next day. I will be looking forward to hear from you on this matter.

Thank you,

A handwritten signature in black ink, appearing to read 'D. Ceballos', with a long horizontal flourish extending to the right.

V.P Diego Ceballos