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Daytime Phone #

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

DOCUMENT # P03000048436 1. Entity Name ALVARO VILLALONGA SERVICE COMPANY							9 PM 3 FRY OF ST SSEE, FLO		
Principal Place 731 SHOTGU SUNRISE, F;	N ROAD	Mailing Address 731 SHOTGUN ROAD SUNRISE, F; 33327			RENSTATEMENT 04				
2. Principal Place of Business		3. Mailing Address							
Suite. Apt. #, etc.		Suite, Apt. #, etc.			09092004	Chg-P	CR	12E034 (10/03)	
City & State		City & State			4. FEI Number	6910	167		oplied For ot Applicable
Zip Country		Zip	Country		-5,-Certificate			\$8.75 Add Fee Require	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name Name Name Name Name Name Name Name					
DIAZ, OSVALDO J 7951 SW 40TH STREET SUITE 206 MIAMI, FL 33155				Street Address (P.O. Box Number is Not Acceptable) 1163 FAIRLANE TRACE # 1510					
8. The above the obligate SIGNATURE	named entity submits this statement for ions of registered agent.			ce or register		th, in the Stal	·	FL Zig Cod am familiar with,	and accept
	LE NOWILL FEE/IS \$550.00 ue by September 8, 2004	9. Election Campaig Trust Fund Contri		\$5. □ Add	.00 May Be led to Fees		_		
10.	OFFICERS AND		11.	PV	ADDITIONS/	CHANGES 1	O OFFICERS	AND DIRECTOR	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST VILLALONGA, ALVARO 731 SHOTGUN ROAD SUNRISE, F; 33327	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	VIL. ESS 116	LALONGA 3 FAIR	LAKE	IARD TRACE 3332	# 151	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VILLALONGA, ALVARO 731 SHOTGUN ROAD SUNRISE, F; 33327	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS 1163	ALONEI Foil L ston Pa	DHE	ALO TRACE 3326	# 1510	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP		, Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	-	, .	000. 9/04—(4289 161-1	□ Change 7491 16 **!50	_
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS				☐ Change ·	☐ Addition
TITLE MAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		, □ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS				☐ Change	☐ Addition
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address.	true and accurate and that moved by the structure of the execute this report a	ny signature sh	hall have the	same legal effect	ct as if made	under oath; th	nat I am an officer	r or director

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

NOVEMBER 14, 2004

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J. C. S. J. C. S. S.

04 NOV 19 PM 3:53

SECRETARY OF STATE FALLAHASSEE FLORIDA

DIVISION OF CORPORATIONS PO BOX 1500 TALLAHASSEE FL 32302-1500

SUBJECT: ALVARO VILLALONGA SERVICE COMPANY REF. # P03000048436

IN REFERENCE OF YOU LETTER # 204A00054066 DATE 09.09.04, I AM ENCLOSING A COMPLETE ANNUAL REPORT/UNIFORM BUSINESS AN THE ANNUAL FEE OF US\$ 150.00

MY SERVICE COMPANY WAS OPENING ON MAY 2003 WITH A PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS (731 SHOTGUN RD, SUNRISE FL 33326)

1172 SETTION

THE CORRECT ADDRESS OF MY SERVICE COMPANY IS 1163 FAIRLAKE TRACE # 1510 WESTON FL. 3332. I AM ATTACHING COPY OF THE DEPARTMENT OF TREASURY LETTER SENDED TO MY COMPANY WITH THIS ADDRESS

I DO NOT RECIVE ANY ANNUAL REPORT, THE ONE I AM ACCOMPANY WAS MAILED TO MY BY 731 SHOTGUN RD

IF I DO HAVE TO PAY THE \$ 400= LATE FEE, PLEASE LET ME KNOW IF I HAVE A CHANCE TO DO 2 PAYMENTS TO COVER THAT.

THANK YOU VERY MUCH FOR YOUR ATTENTION,

ALVARO VILLALONGA SERVICE COMPANY

ALVARO **Y**ILLALONGA

PRESIDENT