2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2004 8:00 am Secretary of State -

RODRIGUEZ 1950 NW 34 SUNRISE, FL The above nathe obligations GRATURE Signature After May G. TILE AME TREET ADDRESS TILE AME TREET ADDRESS TILE AME TREET ADDRESS 1	PL 3323 De of Business etc. Country 6. Name and Address of Current Z, EDWARD I 4 PL 14 33323 Amed entity submits this statement in sof registered agent. Grature, typed or printed name of registered agent NOW!!! FEE IS \$150.00 y 1, 2004 Fee will be \$550 OFFICERS ANI D RODRIGUEZ, EDWARD I 11950 NW 34 PL	for the purpose of changing in and title if applicable. (No	City Its registered office DIE: Registered Agent is paign Financing ntribution. 11. TITLE NAME STREET ADDRE	03142004 4. FEI Number 5. Certificate of 7. Name and Address (P.O. Box Number registered agent, or both latter required when reinstating) \$5.00 May Be Added to Fees	of Status Desired (Address of New Regis	\$8 Fetered Age FL I. I am fam DATE	(10/03) Ap No 3.75 Add e Required ent Zip Code niliar with,	plied For t Applicable itional d
UNRISE, FL 33 Principal Place Suite, Apt. #, 6 City & State Zip RODRIGUEZ 1950 NW 34 SUNRISE, FL The above nather obligations the obligations GRATURE Signature IREET ADDRESS TILE AME TREET ADDRESS	Country 6. Name and Address of Curren 7. EDWARD I 14 PL 133323 The dentity submits this statement in sof registered agent. 15 Statement in sof registered agent. 16 NOW!!! FEE IS \$150.00 or y 1, 2004 Fee will be \$550 or printed page. 17 OFFICERS ANI 18 OFFICERS ANI 19 ORODRIGUEZ, EDWARD I 19 50 NW 34 PL	SUNRISE, FL 33323 3. Mailing Address Suite, Apt. #, etc. City & State Zip TRegistered Agent for the purpose of changing in figure and title of applicable. P. Election Camp Trust Fund Comp Trust Fund Comp DIRECTORS	City City TE: Registered office Daign Financing ntribution. 11. TITLE NAME STREET ADDRE	03142004 4. FEI Number 5. Certificate of 7. Name and Address (P.O. Box Number registered agent, or both latter required when reinstating) \$5.00 May Be Added to Fees	Chg-P Ch	\$8 Fetered Age FL I. I am fam DATE	(10/03) Ap No 3.75 Add Requirecent Zip Code nilliar with,	plied For t Applicable itional d
City & State Zip RODRIGUEZ 1950 NW 34 SUNRISE, FL The above naithe obligations the obligations at the obligations file NATURE FILE I After May O. TILE AME TREET ADDRESS 1 TIT'-ST-ZIP S TILE AME TREET ADDRESS 1 TIT'-ST-ZIP S TILE AME TREET ADDRESS 1 TREET ADDRESS 1 TREET ADDRESS TILE AME TREET ADDRESS TILE AME TREET ADDRESS TILE AME TREET ADDRESS	Country 6. Name and Address of Curren Z, EDWARD I 4 PL 1. 33323 amed entity submits this statement as of registered agent. Spature, typed or printed name of registered agent. NOW!!! FEE IS \$150.00 of 1, 2004 Fee will be \$550 OFFICERS ANI D RODRIGUEZ, EDWARD I 11950 NW 34 PL	Suite, Apt. #, etc. City & State Zip Int Registered Agent for the purpose of changing if the pu	City City TE: Registered office Daign Financing ntribution. 11. TITLE NAME STREET ADDRE	03142004 4. FEI Number 5. Certificate of 7. Name and Address (P.O. Box Number registered agent, or both latter required when reinstating) \$5.00 May Be Added to Fees	Chg-P Ch	\$8 Fetered Age FL I. I am fam DATE	(10/03) Ap No 3.75 Add Requirecent Zip Code nilliar with,	plied For t Applicable itional d
City & State Zip RODRIGUEZ 1950 NW 34 SUNRISE, FL The above naithe obligations the obligations at the obligations fignature Signature FILE I After May 0. TILE AME TREET ADDRESS 1 ITY-ST-ZIP STILE AME TREET ADDRESS 1 ITY-ST-ZIP STILE AME TREET ADDRESS TILE AME TREET ADDRESS TILE AME TREET ADDRESS TILE AME TREET ADDRESS	Country 6. Name and Address of Curren Z, EDWARD I 4 PL 1. 33323 amed entity submits this statement as of registered agent. Spature, typed or printed name of registered agent. NOW!!! FEE IS \$150.00 y 1, 2004 Fee will be \$550 OFFICERS ANI D RODRIGUEZ, EDWARD I 11950 NW 34 PL	City & State Zip Int Registered Agent for the purpose of changing if the	City City TE: Registered office Daign Financing ntribution. 11. TITLE NAME STREET ADDRE	4. FEI Number 5. Certificate of 7. Name and of Address (P.O. Box Number registered agent, or both attre required when reinstating) \$5.00 May Be Added to Fees	Address of New Regis	Stered Age FL a. I am fam DATE	Ap No Requirer Part No Regular With,	t Applicable itional d and accept
Zip RODRIGUEZ 1950 NW 34 SUNRISE, FL The above nathe obligations athe obligations GIGNATURE Sign FILE I After May G. TILE AME TREET ADDRESS 1 TIT'-ST-ZIP S TILE AME TREET ADDRESS 1 TIT'ST-ZIP S TILE AME TREET ADDRESS TILE AME TREET ADDRESS TILE AME TREET ADDRESS TILE AME TREET ADDRESS	Country 6. Name and Address of Curren Z, EDWARD I 4 PL 1. 33323 amed entity submits this statement ins of registered agent. Spature, typed or printed name of registered agent NOW!!! FEE IS \$150.00 y 1, 2004 Fee will be \$550 OFFICERS ANI D RODRIGUEZ, EDWARD I 11950 NW 34 PL	Zip The Registered Agent for the purpose of changing in the purpose of changing in the standard little of applicable. 9. Election Camp Trust Fund Comp Trust Fund Comp DIRECTORS	City City TE: Registered office Daign Financing ntribution. 11. TITLE NAME STREET ADDRE	5. Certificate of 7. Name and Address (P.O. Box Number or registered agent, or both alter required when reinstating) \$5.00 May Be Added to Fees	312 +3 +9 of Status Desired [Address of New Regis r is Not Acceptable) n, in the State of Florida	FL a. I am fam	No Requirement Zip Code miliar with,	t Applicable itional d and accept
RODRIGUEZ 1950 NW 34 SUNRISE, FL The above nathe obligations the obligations GRATURE Signature FILE I After May G. TILE AME TREET ADDRESS 1 ITV-ST-ZIP STILE AME TREET ADDRESS 1 ITV-ST-ZIP STILE AME TREET ADDRESS TILE AME TREET ADDRESS TILE AME TREET ADDRESS TILE AME TREET ADDRESS	Country 6. Name and Address of Curren Z, EDWARD I 4 PL 1. 33323 amed entity submits this statement ins of registered agent. Spature, typed or printed name of registered agent NOW!!! FEE IS \$150.00 y 1, 2004 Fee will be \$550 OFFICERS ANI D RODRIGUEZ, EDWARD I 11950 NW 34 PL	for the purpose of changing in the first and title if applicable. 9. Election Camp Trust Fund Count of DIRECTORS	City City TE: Registered office Daign Financing ntribution. 11. TITLE NAME STREET ADDRE	5. Certificate of 7. Name and Address (P.O. Box Number or registered agent, or both alter required when reinstating) \$5.00 May Be Added to Fees	of Status Desired [Address of New Regis r is Not Acceptable) n, in the State of Florida	FL a. I am fam	3.75 Add e Required ent Zip Code miliar with,	and accept
RODRIGUEZ 1950 NW 34 SUNRISE, FL The above nathe obligations IGNATURE Signature FILE I After May O. TILE AME TREET ADDRESS	Z, EDWARD I 44 PL 14 PL 15 33323 amed entity submits this statement in sof registered agent. gnature, typed or printed name of registered agent. NOW!!! FEE IS \$150,00 of 1, 2004 Fee will be \$550 OFFICERS ANI D RODRIGUEZ, EDWARD I 11950 NW 34 PL	for the purpose of changing in and title if applicable. 9. Election Camp Trust Fund Col	City Its registered office OTE: Registered Agent of the paign Financing outribution. 11. TITLE NAME STREET ADDRE	Address (P.O. Box Number or registered agent, or both lure required when reinstating) \$5.00 May Be Added to Fees	r is Not Acceptable) n, in the State of Florida	FL a. I am fam	Zip Code illiar with,	and accept
The above nathe obligations of the obligations of t	armed entity submits this statement in sof registered agent. Sprature, typed or printed name of registered agent. NOW!!! FEE IS \$150,00 of 1, 2004 Fee will be \$550 OFFICERS ANI DEPORT OFFICERS AND DEPORT	9. Election Camp Trust Fund Col	City Its registered office OTE: Registered Agent of the paign Financing outribution. 11. TITLE NAME STREET ADDRE	or registered agent, or both Sture required when reinstating) \$5.00 May Be Added to Fees	n, in the State of Florida	DATE	RECTORS	and accept
The above name the obligations of the obligations o	armed entity submits this statement ins of registered agent. greature, typed or printed name of registered agent. NOW!!! FEE IS \$150.00 or y 1, 2004 Fee will be \$550 OFFICERS AND DECORRIGUEZ, EDWARD I 11950 NW 34 PL	9. Election Camp Trust Fund Col	ats registered office DTE: Registered Agent of Daign Financing Intribution. 11. TITLE NAME STREET ADDRE	\$5.00 May Be Added to Fees		DATE	RECTORS	and accept
THE Obligations of the obligatio	pnature, typed or printed name of registered agent NOW!!! FEE IS \$150.00 OFFICERS ANI OFFICERS ANI ORODRIGUEZ, EDWARD I 11950 NW 34 PL	9. Election Camp Trust Fund Col	ats registered office DTE: Registered Agent of Daign Financing Intribution. 11. TITLE NAME STREET ADDRE	\$5.00 May Be Added to Fees		DATE	RECTORS	and accept
THE Obligations of the obligatio	pnature, typed or printed name of registered agent NOW!!! FEE IS \$150.00 OFFICERS ANI OFFICERS ANI ORODRIGUEZ, EDWARD I 11950 NW 34 PL	9. Election Camp Trust Fund Col	DTE: Registered Agent is baign Financing ntribution. 11. TITLE NAME STREET ADDRE	\$5.00 May Be Added to Fees		DATE	RECTORS	S IN 11
FILE I After May O. ILE D. R TREET ADDRESS IT ILE D. R TREET ADDRESS IT ITY-ST-ZIP S ITY-ST-ZIP S ITY-ST-ZIP S ITE AME TREET ADDRESS IT ILE AME TREET ADDRESS IT ILE AME TREET ADDRESS	NOW!!! FEE IS \$150.00 y 1, 2004 Fee will be \$550 OFFICERS AND CRODRIGUEZ, EDWARD I 11950 NW 34 PL	9. Election Camp Trust Fund Co	paign Financing Intribution. 11. TITLE NAME STREET ADDRE	\$5.00 May Be Added to Fees	CHANGES TO OFFICER	RS AND DI		
FILE I After May 0. ILE	NOW!!! FEE IS \$150.00 y 1, 2004 Fee will be \$550 OFFICERS AND CRODRIGUEZ, EDWARD I 11950 NW 34 PL	9. Election Camp Trust Fund Co	paign Financing Intribution. 11. TITLE NAME STREET ADDRE	\$5.00 May Be Added to Fees	CHANGES TO OFFICER			
After May 0. ILE R TREET ADDRESS IT REET ADDRESS IT REET ADDRESS IT S ITY-ST-ZIP S ITY-ST-ZIP S ITE S ITY-ST-ZIP S ITE AME TREET ADDRESS IT S ITE AME TREET ADDRESS IT S	OFFICERS AND	D.00 Trust Fund Co	11. TITLE NAME STREET ADDRE	Added to Fees	CHANGES TO OFFICER			
ILE DRAME R TREET ADDRESS 1 ITY-ST-ZIP S TREET ADDRESS 1 ITY-ST-ZIP R S ILE S	D RÖDRIGUEZ, EDWARD I 11950 NW 34 PL		TITLE NAME STREET ADDRE	ADDITIONS/	CHANGES TO OFFICER			
AMME R TREET ADDRESS 1 ITY-ST-ZIP S TILE D AMME R TREET ADDRESS 1 ITY-ST-ZIP S TILE AME TREET ADDRESS ILE AME TREET ADDRESS	RÖDRIGUEZ, EDWARD I 11950 NW 34 PL	☐ Delete	name Street Addre			. [Change	Addition Addition
TREET ADDRESS 1 ITY-ST-ZIP S ITLE DREET ADDRESS ITY-ST-ZIP S ILE AME TREET ADDRESS ILE AME TREET ADDRESS	11950 NW 34 PL		STREET ADDRE					
TILE RAME RITEET ADDRESS ILE AME TREET ADDRESS TILE AME TREET ADDRESS								
AME R TREET ADDRESS 1 ITY-ST-ZIP S TILE AME TREET ADDRESS	SUNRISE, FL 33323	Delete	CITY-ST-ZIP	 				☐ Addition
ITY-ST-ZIP S TILE AME TREET ADDRESS	RODRIGUEZ, YVONNE A		NAME			_		<u></u> 1.0011.011
ame Treet address	11950 NW 34 PL SUNRISE, FL 33323		STREET ADDRE					
TREET ADDRESS	<u></u>	☐ Delete	TITLE				Change	Addition
I .			NAME STREET ADDRE					
			CITY-ST-ZIP					
TLE		☐ Delete	TITLE			E	Change -	Addition
TREET ADDRESS			NAME STREET ADDRE					•
TY-ST-ZIP			CITY-ST-ZIP					
TLE ,		☐ Delete	TITLE NAME] Change	☐ Addition
TREET ADDRESS			STREET ADDRE					
TY-ST-ZIP			CITY-ST-ZIP					
TLE AME		☐ Delete	TITLE NAME] Change	☐ Addition
TREET ADDRESS			STREET ADDRE					
ITY-ST-ZIP		2	CITY-ST-ZIP					
2. I hereby cert indicated on of the corpor changed, or SIGNATU	rtify that the information supplied win in this report or suppliemental report oration or the receiver of trustee em or on an attaching with an address	ith this filing does not qualify to this true and accurate and that apowered to execute this repo	for the exemption t my signature sh ornas required by	sted in Section 119.07(3)(i have the same legal effect), Florida Statutes. I furt t as if made under oath s; and that my name ap	ther certify ; that I am opears in B	that the in an officer Block 10 or	formation or director Block 11 if
		s, with all other like impowere	w /)	954	40	w	of as