2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000053480

Entity Name: DISTRIBUIDORA LA REBAJA, CORP.

FILED Apr 29, 2004 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
	HIGAN AVENU EE, FL 34744	E			
Current Mailing Address:			New Mailing Address:		
3022 MICHIGAN AVENUE KISSIMMEE, FL 34744			1220 COURTNEY CHASE CIR ORLANDO, FL 32837		
FEI Number	: 02-0691606	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:	
	IARIA E ER WAY VILLA LM BEACH, FI				
	named entity : e of Florida.	submits this statement for the p	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PEREZ, MARIA 823 WATER W	Delete LE AY VILLAGES CT EACH, FL 33413	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () VELASQUEZ, M 3022 MICHIGA KISSIMMEE, F	N AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (RESTREPO, JU 3022 MICHIGA KISSIMMEE, F	N AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () PINEDA, RICAI 3022 MICHIGA KISSIMMEE, F	N AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JUAN D RESTREPO 04/29/2004 ٧