2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054642

Entity Name: BURON SERVICES INC.

FILED Apr 30, 2004 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1516, E. COLONIAL DR 6220 S ORANGE BLOSSOM TRAIL 603

ORLANDO, FL 32803 US ORLANDO, FL 32809 US

Current Mailing Address: New Mailing Address:

6220 S ORANGE BLOSSOM 1516, E. COLONIAL DR 603

ORLANDO, FL 32803 US ORLANDO, FL 32809 US

FEI Number: 57-1166213 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MACHADO, LEANDRO B MACHADO, LEANDRO B 2923 S. SEMORAN BLVD., 4553 LAKEWAY DR ORLANDO, FL 32839 US

ORLANDO, FL 32822 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: LEANDRO BURON MACHADO 04/30/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition COSTA, VALDEMAR S MACHADO, LEANDRO B Name: Name:

AVE 20 DE AGOSTO, # 1793 4553 LAKEWAY DR Address: Address: City-St-Zip: CATALAO, GO 75701 BR City-St-Zip: ORLANDO, FL 32839 US

DVP (X) Delete Title: Title: () Change () Addition

Name: MACHADO, ERICA B Name: AVE 20 DE AGOSTO, # 1793 Address: Address: CATALAO, GO 75701 BR City-St-Zip: City-St-Zip:

Title: Title: DS (X) Delete () Change () Addition

COSTA, IVETE S Name: Name: AVE 20 DE AGOSTO, # 1793 Address: Address: City-St-Zip: CATALAO, GO 75701 BR City-St-Zip:

Title: DT (X) Delete Title: () Change () Addition

MACHADO, LEANDRO B Name: Name: Address: 2923 S. SEMORAN BLVD, # 521 Address: City-St-Zip: ORLANDO, FL 32822 US 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: LEANDRO BURON MACHADO DP 04/30/2004