

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054969

FILED  
May 01, 2004  
Secretary of State

Entity Name: CORAL GABLES CONSULTING, INC.

## Current Principal Place of Business:

1865 BRICKELL AVENUE  
A-814  
MIAMI, FL 33129

## Current Mailing Address:

1865 BRICKELL AVENUE  
A-814  
MIAMI, FL 33129

## New Principal Place of Business:

299 ALHAMBRA CIRCLE  
SUITE 203  
CORAL GABLES, FL 33134

## New Mailing Address:

299 ALHAMBRA CIRCLE  
SUITE 203  
CORAL GABLES, FL 33134

FEI Number: 56-2360334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAZOS, CARLOS M  
299 ALHAMBRA CIRCLE  
SUITE 203  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: SANCHEZ, PEDRO  
Address: 1865 BRICKELL AVENUE. A-814  
City-St-Zip: MIAMI, FL 33129

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BENITO, ANTONIO LUIS  
Address: 299 ALHAMBRA CIRCLE. SUITE 203  
City-St-Zip: CORAL GABLES, FL 33134

Title: DST ( ) Change (X) Addition  
Name: LOPEZ, ALICIA  
Address: 299 ALHAMBRA CIRCLE. SUITE 203  
City-St-Zip: CORAL GABLES, FL 33134

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: ANTONIO LUIS BENITO

P

05/01/2004

Electronic Signature of Signing Officer or Director

Date