## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 31, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # P0300005529 ND HOLDINGS, INC.		Secretary of State				
Principal Place 14600 SW 1 MIAMI, FL 3	136 STREET 0	tailing Address C/O ELLIOTT HARRIS 111 S.W. 3 ST, 6 FLOOR MIAMI, FL 33130					
E	OO NOT WRITE II	CE	03092005  4. FEI Numbe 56-2362  5. Certificate 6	Applied For Not Applicable Additional irred			
HARRIS, ELLIOTT 111 SW 3RD STREET 6TH FLOOR MIAMI, FL 33130  The series of Current Registered Agent  DO NOT WRITE IN THIS SPACE							
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and life if applicable.  (NOTE: Registered Agent signature required when reinstating)  DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing		5.00 May Be ided to Fees			
10.	OFFICERS AND DIRE	CTORS	1				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD GARCIA-CARRILLO, MICHAEL 14600 S.W. 146TH STREET MIAMI, FL 33186 VPD GARCIA-CARRILLO, PEDRO			· 	Unnan 03/31/05	0282563 <sup></sup> 5-80048-012	158.75
STREET ADDRESS CITY-ST-ZIP	14600 S.W. 146TH STREET MIAMI, FL 33186	<u> </u>		٠	 		
NAME STREET ADDRESS CITY-ST-ZIP	GARCIA-CARRILLO, PEDRO JR 14600 S.W. 146TH STREET MIAMI, FL 33186	··· — · — · · — · · · · · · · · · · · ·	<b>-</b> 1.		NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CASTELLANOS, RAIMUNDO G 14600 S.E. 146TH STREET MIAMI, FL 33186			- IN 7	THIS SI	PACE	
TITLE NAME	S – HARRIS, ELLIOTT						

12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-\$T-ZIP

TITLE NAME STREET ADDRESS CITY ST-ZIP

STREET ADDRESS 111 SW 3RD STREET SIXTH FLOOR

MIAMI, FL 33130

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 29, 2005 (305)3580146

R Date

Daytimė Phone ⊭