2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P 03 0000 57 683					to Egypti	,	
MESANTA IN UESTMENTS, INC				7.	FILED		
Principal Place of Business Mailing Address / Q = T 1/1/1				94 J	UL-8 AM 12	: 45	
6955 NW 525T #204 6955 NW 525T #204					ETARY OF ST	[Air	
MIAMI FL 33166 MIAMI FL				TALL	AHASSEE, FLO	ORIDA	
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3. Mailing Address			2.47				
Suite, Apt. #, etc.							e ilaradi li 1961
City & State				05182004	Chg-P	CR2E034 (10/0	3)
<u> </u>	Chy & State			4. FEI Numb	346822		Applied For
33/66 DIAMI DADE	Zip 33/66	Country		- 0		¢0.75	Not Applicable
93/66 MIA MI DADE 6. Name and Address of Current R	agisterna Agent	miam	1 2110	<u> </u>	of Status Desired	Fee Requ	ired
1 5 6 6 14 0 10 10		Nam	e :	Maria .	Address of New Re	gistered Agent	
6955 NW 52 ST # 204			t Address (D		M6 per is Not Acceptable)	<u> </u>	
.00 ()				the state of the s	~ 13 Not Acceptable)		
MIAMI FL 3316	6	<u> </u>	<u> </u>		<u> </u>		
\$ The above	*	City	14 17 1	3,		FL Zip Co	ode
The above named entity submits the statement for the obligations of registered agency.	the purpose of changing its	registered office	or registere	d agent, or bo	th, in the State of Flor	ida. Lam familiar wil	h, and accept
SIGNATURE 7	•		. 8	1		7/1/2	i.
Signature, typed or pinled negligible and good and	d title if applicable. (NOTE:	: Registered Agent sig	ే. స్ట్రీ bariupan arutang	vhen reinstating)	· · · · · · · · · · · · · · · · · · ·	DATE	<u> </u>
FILE NOW!!! FEE IS \$150.00	9 Flection Compain	Cii		1.27			
Due by September 8, 2004	9. Election Campaig Trust Fund Contri		☐ Added	00 May Be d to Fees	In accordance wi corporation did n	ith s. 607.193(2)(b ot receive the prio), F.S., the r notice.
OFFICERS AND D		11.	2 345	ADDITIONS	CHANGES TO OFFIC	ERS AND DIRECTO	PRS IN 11
NAME SUSTAVO SANTAI STREET ADDRESS 4955 NW 52	ST # 3 64	TITLE NAME	1 (t			Change	Addition
CITY-ST-ZIP MIAMI FL 3	31 # 204	STREET ADDRES	s 🧗	Y #			·
TOTAL		CITY-ST-ZIP					
NAME LEONIDAS M. STREET ADDRESS 6955 N. N. 52	EUES 古	NAME				☐ Change	Addition
STREET ADDRESS 6955 NW 52 CITY-ST-ZP M/AM/FL 33	37 + 204	STREET ADDRESS	s · *		وسدر وسدو وسدو وسدر وسعر وسع		_
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NILE (☐ Delete	CITY-ST-ZIP TITLE		·		——————————————————————————————————————	
NAME STREET ADDRESS		NAME				Change .	Addition
CITY-ST-ZP		STREET ADDRESS Caty-St-Zip	i	٠	•	•	
TITLE .	☐ Delete	TITLE	41	,			
NAME STREET ADDRESS		NAME		-		☐ Change	☐ Addition
CITY-ST-ZIP		STREET ADORESS CITY-ST-ZIP				,	Ì
IMLE .	☐ Delete	TITLE	 	<u> </u>	· · · · · · · · · · · · · · · · · · ·	□ 0ь	[**] A 3250
NAME STREET ADDRESS		NAME				☐ Change	Addition
CITY-ST-ZIP		STREET ADDRESS City-St-Zip	ľ				
12. I hereby certify that the information supplies with thi indicated on this report or supplemental report is true of the corporation or the receiver or rustee employed changed, or on an attachment without additional changed, or on an attachment without supplies.	s filing does not qualify for the	te exemption st	ated in Section	on 119 07/3V/	Florida Statutae 1 fo	Islan portify that 4 -	intermet
of the corporation or the receiver or pustee employer changed, or on an attachment with an address, with	red to execute this report as	signature shall required by Ct	have the san	ne legal effect lorida Statutes	as if made under oat ; and that my name a	h; that I am an office	r or director
	oner like empowered.	-	\sim	^	'. 1	305	-
SIGNATURE: A SIGNATURE AND WHEELD PROPERTY OF THE PROPERTY OF	ED NAME OF COMMAND		Keza	reent	7/6/	14 965	-43/48
<i>「上でわりつ</i> 州	ENDER OF	DIRECTOR	V	U	Date	Daytime Phone #	I ala
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