

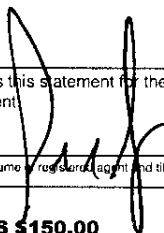
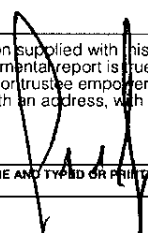


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90074 026 ***150.00

DOCUMENT # P03000058157					
1. Entity Name FLAGLER WESTAR INC.					
Principal Place of Business 11830 SW 40TH ST MIAMI, FL 33175		Mailing Address 11830 SW 40TH ST MIAMI, FL 33175			
2. Principal Place of Business 1800 W. FLAGLER ST Suite, Apt. #, etc. MIAMI FL		3. Mailing Address 1800 W. FLAGLER ST Suite, Apt. #, etc.		 03182004 Chg-P CR2E034 (10/03)	
City & State MIAMI FL		City & State MIAMI FL			
Zip 33135		Country DADE		4. FEI Number 13-4258973	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent RODRIGUEZ, JESUS 11830 SW 40TH ST MIAMI, FL 33175			7. Name and Address of New Registered Agent Name: RODRIGUEZ JESUS Street Address (P.O. Box Number is Not Acceptable): 1800 W. FLAGLER ST City: MIAMI FL Zip Code: 33135		
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:  (NOTE: Registered Agent signature required when reinstating) DATE: _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUEZ, JESUS		NAME	RODRIGUEZ JESUS	
STREET ADDRESS	11830 SW 40TH ST		STREET ADDRESS	1800 W. FLAGLER ST	
CITY-ST-ZIP	MIAMI, FL 33175		CITY-ST-ZIP	MIAMI FL 33135	
TITLE	VD	<input type="checkbox"/> Delete	TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DE LA GUARDIA, PARTICIO		NAME	DE LA GUARDIA PATRICIO	
STREET ADDRESS	11830 SW 40TH ST		STREET ADDRESS	1800 W. FLAGLER ST	
CITY-ST-ZIP	MIAMI, FL 33175		CITY-ST-ZIP	MIAMI FL 33135	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
				Date _____ Daytime Phone # _____	