

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000064477

FILED
Apr 26, 2005
Secretary of State

Entity Name: PROMENADE SERVICES, INC.

Current Principal Place of Business:

THREE ISLAND AVENUE
SUITE 11-F
MIAMI BEACH, FL 33139

New Principal Place of Business:

433 NW 1ST. AVENUE
FORT LAUDERDALE, FL 33301

Current Mailing Address:

THREE ISLAND AVENUE
SUITE 11-F
MIAMI BEACH, FL 33139

New Mailing Address:

2637 EAST ATLANTIC BLVD.
#160
POMPANO BEACH, FL 33062

FEI Number: 90-0099875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIAGGINI, ALIDIA H
THREE ISLAND AVENUE
SUITE 11-F
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

JOLIE, IDANIA
10120 SW 15TH PLACE
DAVIE, FL 33324 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: IDANIA JOLIE

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SALDIAS, CARLOS A
Address: 2121 NE 68 ST
City-St-Zip: FT LAUDERDALE, FL 33308

Title: DV () Delete
Name: HIERS, ANA MARIE
Address: THREE ISLAND AVE STE SUITE 11-K
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS () Delete
Name: SALDIAS, GUSTAVO
Address: THREE ISLAND AVENUE, SUITE 11-F
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SALDIAS, CARLOS A
Address: 2132 NE 68 ST
City-St-Zip: FT LAUDERDALE, FL 33308

Title: DV (X) Change () Addition
Name: HIERS, ANA MARIA
Address: THREE ISLAND AVE STE SUITE 11-K
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS (X) Change () Addition
Name: SALDIAS, GUSTAVO
Address: 249 SE 1ST. TERRACE
City-St-Zip: MIAMI BEACH, FL 33060

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: ANA MARIA HIERS

DV

04/26/2005

Electronic Signature of Signing Officer or Director

Date