

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067768

Entity Name: CRUZ CONTROL CORP.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

16002 NE 3RD AVE
N MIAMI BCH, FL 331624312

New Principal Place of Business:

15325 NW 60 AVE.
SUITE 101
MIAMI LAKES, FL 330142470 US

Current Mailing Address:

16002 NE 3RD AVE
N MIAMI BCH, FL 331624312

New Mailing Address:

P.O. BOX 590950
MIAMI, FL 331590950 US

FEI Number: 75-3123107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUZ-NATAL, MILDRED
16002 NE 3RD AVE
N MIAMI BCH, FL 331624312 US

Name and Address of New Registered Agent:

CRUZ-NATAL, MILDRED
15325 NW 60 AVE.
SUITE 101
MIAMI LAKES, FL 330142470 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: MILDRED CRUZ-NATAL

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: CRUZ, ANTHONY
Address: 16002 NE 3RD AVE
City-St-Zip: N MIAMI BCH, FL 331624312

Title: DVPT (X) Delete
Name: CRUZ-NATAL, MILDRED
Address: 16002 NE 3RD AVE
City-St-Zip: N MIAMI BCH, FL 331624312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVT (X) Change () Addition
Name: CRUZ, ANTHONY
Address: 15325 NW 60 AVE., STE. 101
City-St-Zip: MIAMI LAKES,, FL 330142470 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANTHONY CRUZ

D/P

04/30/2005

Electronic Signature of Signing Officer or Director

Date