2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AN
Secretary of State

1. Entity Name K.C. CUENCA, INC.	/ 1004 • • • • •		
Principal Place of Business 851 SW 134 PLACE MIAMI, FL 33184-1952	Mailing Address 851 SW 134 PLACE MIAMI, FL 33184-1952		S SURVINDUS TIL DRUGUS HILL STEIN DEN SI DRUGUS DRUGUS STEIN FILDRI WILDE LINL STEINDA IN THUL T
DO NOT WRIT		CE	D4222005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired S8.75 Additional Fee Regulred
ARROM, ORLANDO 10556 NW 26 ST., STE. D-203 MIAMI, FL 33172			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 of printed have or registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$5	50.00 Prust Fund Contribution.	ncing \$5.	.00 May Be ed to Fees
10. ————————————————————————————————————	IND DIRECTORS	and the second of the second o	D110000011
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u>UD00</u> 00352145
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied indicated on this report or supplementation of the corporation or the receiver or wistee changed, or on an attachment with an additional control of the corporation of the receiver or wistee.	with this/filling does not qualify for the ex- orus trife and accurate and that my signs shoot fered to execute this report as requess, with all other like empowered.	emption stated in Se ature shall have the uired by Chapter 60'	action 119 07(3)(i), Florida Statutes. I further certify that the information same legal effect as if made under oath, that I am an officer or director 7. Florida Statutes, and that my name appears in Block 10 or Block 11 if