


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000075869
 1. Entity Name
 MANACA INVESTMENT CORPORATION



Principal Place of Business Mailing Address
 1643 BRICKELL AVE #4102 1643 BRICKELL AVE #4102
 MIAMI, FL 33129 MIAMI, FL 33129

DO NOT WRITE IN THIS SPACE



01192005 No Chg-P CR2E034 (10/03)

4. FEI Number 58-2676497	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 EL-NAFFY, HANI
 1643 BRICKELL AVE #4102
 MIAMI, FL 33129

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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: *H. Naffy* DATE: 3/17/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	EL-NAFFY, HANI K
STREET ADDRESS	1643 BRICKELL AVE # 4102
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	VD
NAME	EL-NAFFY KALOUCHE, DANIELLE
STREET ADDRESS	1643 BRICKELL AVE # 4102
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 03/22/05-80019-008 150.00

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: *H. Naffy* DATE: 3/17/05 DAYTIME PHONE #: (305) 5208150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #