2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE: 🍝

Feb 18, 2004 8:00 am **DOCUMENT # P03000077110 Secretary of State** 1. Entity Name 02-18-2004 90021 007 ***150.00 MANA DATA, CORP. Principal Place of Business Mailing Address 15315 SW 106 TERRACE #413 15315 SW 106 TERRACE #413 **MIAMI FL 33196** MIAMI FL 33196 rincipal Place of Business 4321 SW 88TH ST SW 889H ST MOORE CR2E034 (11/03) Applied For 4. FEI Number FLORIDA Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent JUAN-R CAPURRO, JUAN R 15315 SW 106 TERRACE #413 MIAMI FL 33196 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. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Change ☐ Addition TITLE TITLE ☐ Delete VARADO, ALI D NAME ALVARADO, ALI D NAME 14321 SW 8814 ST # STREET ADDRESS 15315 SW 106 TERRACE #413 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33196 Delete TITLE ☐ Addition TITLE NAME CAPURRO, JUAN R NAME 15315 SW 106 TERRACE #413 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33196** ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITS E ☐ Delete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change ☐ Delete TITLE 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 eath; that I am an efficer 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

FILED