2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078706

Entity Name: BRACHE'S PLAZA, INC.

FILED Jan 15, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 341483 4316 HOLLOW HILL DRIVE TAMPA, FL 336941483 TAMPA, FL 33624 **Current Mailing Address: New Mailing Address:** P.O. BOX 341483 4316 HOLLOW HILL DRIVE TAMPA, FL 336941483 TAMPA, FL 33624 US **FEI Number:** FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRACHE, CARMEN 4316 HOLLOW HILL DRIVE TAMPA, FL 33624 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BRACHE, CARMEN Name: Name: 4316 HOLLOW HILL DRIVE Address: Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip: Title: VSD Title: () Change () Addition () Delete LEDESMA, JUAN F Name: Name: P.O. BOX 341483 Address: Address: TAMPA, FL 336941483 City-St-Zip: 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 Statutés. 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: JUAN LEDESMA **VSD** 01/15/2004