

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000084497

Entity Name: FS UNIT 3010, INC.

FILED
Feb 18, 2005
Secretary of State

Current Principal Place of Business:

1435 BRICKELL AVE.
STE 3010
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

% 1200 BRICKELL AVE.
STE 900
MIAMI, FL 33131 US

New Mailing Address:

1200 BRICKELL AVE.
STE 900
MIAMI, FL 33131 US

FEI Number: 98-0405510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGI REGISTERED AGENTS, INC.
1200 BRICKELL AVE., STE. 900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: SILVA, JOSE C
Address: NO. 2121 40 PISO., COL. PENA BLANCA
City-St-Zip: SANTE FE.01210 MEXICO D.F.,

Title: ST () Delete
Name: FOLCH, SALVI
Address: NO. 2121 40 PISO., COL. PENA BLANCA
City-St-Zip: SANTA FE 01210 MEXICO D.F.,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SILVA, JOSE C
Address: NO. 2121 40 PISO., COL. PENA BLANCA
City-St-Zip: SANTE FE.01210 MEXICO D.F., MX

Title: ST (X) Change () Addition
Name: FOLCH, SALVI
Address: NO. 2121 40 PISO., COL. PENA BLANCA
City-St-Zip: SANTA FE 01210 MEXICO D.F., MX

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: JOSE C SILVA

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02/18/2005

Electronic Signature of Signing Officer or Director

_____ Date