2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000087166

Entity Name: CED OF MIAMI, INC.

Title:

Title:

Name: Address:

Name:

Address:

City-St-Zip:

City-St-Zip:

() Delete

(X) Delete

DELGADO, ANA O

MIAMI, FL 33182

1142 NW 143TH PL.

DELGADO, LETICIA

1142 NW 143TH PL.

MIAMI, FL 33182

FILED Mar 07, 2004 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:
1142 NW 143TH PL. MIAMI, FL 33182		1691 W 37 ST BAY 32 HIALEAH, FL 33012
Current Mailing Address:		New Mailing Address:
1142 NW 143TH PL. MIAMI, FL 33182		1691 W 37 ST BAY 32 HIALEAH, FL 33012
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:
CAST, LOUIS F 4805 NW 79TH AVE., #9 MIAMI, FL 33166		DELGADO, JOSE R 1691 W 37 ST BAY 32 HIALEAH, FL 33012
The above in the State		pose of changing its registered office or registered agent, or both,
SIGNATURE: JOSE R DELGADO		03/07/2004
	Electronic Signature of Registered Agent	Date
Election Can	npaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD (X) Delete DELGADO, CARLOS D 1142 NW 143TH PL. MIAMI, FL 33182	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	V () Delete DELGADO, JOSE R 1142 NW 143TH PL. MIAMI, FL 33182	Title: P (X) Change () Addition Name: DELGADO, JOSE R Address: 1691 W 37 ST BAY 32 City-St-Zip: HIALEAH, FL 33012

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.

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

SIGNATURE: JOSE R DELGADO P 03/07/2004

(X) Change () Addition

() Change () Addition

DELGADO, ANA O

1691 W 37 BAY 32

MIAMI, FL 33182