

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090670

FILED  
Jan 31, 2004  
Secretary of State

Entity Name: CUEVA INVESTMENT GROUP INC.

## Current Principal Place of Business:

1248 S. ALHAMBRA CIRCLE  
CORAL GABLES, FL 33146

## New Principal Place of Business:

## Current Mailing Address:

1248 S. ALHAMBRA CIRCLE  
CORAL GABLES, FL 33146

## New Mailing Address:

FEI Number: 56-2402003

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CUEVA, DIEGO  
1248 S. ALHAMBRA CIRCLE  
CORAL GABLES, FL 33146

## Name and Address of New Registered Agent:

CUEVA, DIEGO F  
1248 S. ALHAMBRA CIRCLE  
CORAL GABLES, FL 33146

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: DIEGO F CUEVA

01/31/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: CUEVA, DIEGO  
Address: 1248 S. ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33146

Title: VD ( ) Delete  
Name: CUEVA, HERNAN  
Address: 1248 S. ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete  
Name: CUEVA, HERNAN JR.  
Address: 1248 S. ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33146

Title: D (X) Delete  
Name: CUEVA, MARIA  
Address: 1248 S. ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete  
Name: ALVAREZ, MARTHA  
Address: 1248 S. ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33146

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: CUEVA, DIEGO F  
Address: 1248 S. ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33146

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 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: DIEGO F CUEVA

P

01/31/2004

Electronic Signature of Signing Officer or Director

Date