2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091780

FILED Jul 21, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
14005 SW MIAMI, FL		BLDG 120-A #7		
Current Mailing Address:			New Mailing Address	:
14005 SW MIAMI, FL		BLDG 120-A #7		
FEI Number:	: 20-0172263	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
ELIAS, GIL 14005 SW MIAMI, FL	127 STREET	BLDG 120-A #7		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	I office or registered agent, or both,
	e of Florida.	submits this statement for the p	ourpose of changing its registered	l office or registered agent, or both,
in the State	e of Florida. Î	submits this statement for the particles of Registered Age		d office or registered agent, or both, Date
in the State SIGNATUR In accordan	e of Florida. RE: Electror ce with s. 607.19	·	ent	
in the State SIGNATUR In accordan Election Car	e of Florida. RE: Electror ce with s. 607.19	nic Signature of Registered Age (3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ent t receive the prior notice.	
in the State SIGNATUR In accordan Election Car	e of Florida. RE: Electror ce with s. 607.19 mpaign Financin S AND DIREC PD (ELIAS, GILBER	nic Signature of Registered Age (3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). (TORS:) Delete RTO ST B-120-A #7	ent t receive the prior notice. ADDITIONS/CHANGE	Date

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: CLARA M. SOWERS **VSD** 07/21/2004