2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2005 8:00 am
Secretary of State

02-03-2005 90047 016 ***150.00

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01312005 Chg-P CR2E034 (10/03)

DOCUMENT # P03000096183

1. Entity Name
VIOLETH DUSSAN BELLAS ARTES USA, CORP.

Principal Place of Business	Mailing Address
7215 NW 41ST ST BAY I MIAMI, FL 33166	C/O EDUARDO LEISECA, EA 9655 SO DIXIE HWY SUITE 113 MIAMI, FL 33156

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number ~~APPLIED FOR~~ 01-0652178 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LEISECA, EDUARDO EA 9655 SO DIXIE HWY SUITE 113 MIAMI, FL 33156	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	DUSSAN, VIOLETH	NAME	
STREET ADDRESS	~~9655 SO DIXIE HWY SUITE 113~~	STREET ADDRESS	12629 SW 123 TERR
CITY-ST-ZIP	~~MIAMI, FL 33156~~	CITY-ST-ZIP	MIAMI FL 33186
TITLE	VD ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	LOPEZ-GARZON, IVAN	NAME	
STREET ADDRESS	~~9655 SO DIXIE HWY SUITE~~ 113	STREET ADDRESS	12629 SW 123 TERR
CITY-ST-ZIP	~~MIAMI, FL 33156~~	CITY-ST-ZIP	MIAMI FL 33186
TITLE	D ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	CASTRILLON-DUSSAN, ROBERT M	NAME	
STREET ADDRESS	~~9655 SO DIXIE HWY SUITE 113~~	STREET ADDRESS	12629 SW 123 TERR
CITY-ST-ZIP	~~MIAMI, FL 33156~~	CITY-ST-ZIP	MIAMI FL 33186
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: VIOLETH DUSSAN PRESIDENT 1/31/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #