

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000096996

Entity Name: SUMAFORCES, CORPORATION

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

3400 N.E. 192 ST LP12
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

3400 N.E. 192 ST LP12
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 65-0200850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBINSON LOPEZ, JHON
3400 N.E. 192 ST LP12
AVENTURA, FL 33180 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: LOPEZ, JOHN ROBINSON
Address: 7305 N.W. 113 PLACE
City-St-Zip: MIAMI, FL 33178

Title: CEO () Delete
Name: BAYER, OSCAR
Address: 3400 NE 192 ST LP12
City-St-Zip: AVENTURA, FL 33180

Title: MGMD () Delete
Name: SCHULZ, FEDERICO A
Address: 7309 N.W. 113 PLACE
City-St-Zip: MIAMI, FL 33178

Title: FD () Delete
Name: MAIRM, JUAN A
Address: 7089 S.W. 152 PLACE
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JHON ROBINSON LOPEZ

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04/29/2005

Electronic Signature of Signing Officer or Director

Date