## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000099201

Entity Name: GRUPO OTIXE, INC

FILED Aug 23, 2004 Secretary of State

Littly Na	ME. GROFO OTIAL, INC.			
Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
19 WEST FLAGLER STREET STE 605 MIAMI, FL 33130		19 WEST FLAGLER S' MIAMI, FL 33130	19 WEST FLAGLER STREET STE 707 MIAMI, FL 33130	
Current M	lailing Address:	New Mailing Address	New Mailing Address:	
19 WEST FLAGLER STREET STE 605 MIAMI, FL 33130		19 WEST FLAGLER S' MIAMI, FL 33130	19 WEST FLAGLER STREET STE 707 MIAMI, FL 33130	
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:	
GARAY, RAWNY ESQ 19 WEST FLAGLER STREET STE 605 MIAMI, FL 33130			GARAY, RAWNY ESQ 19 WEST FLAGLER STREET STE 707 MIAMI, FL 33130	
	e named entity submits this statement for the e of Florida.	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:			08/23/2004	
	Electronic Signature of Registered Ac	gent	Date	
	ice with s. 607.193(2)(b), F.S., the corporation did r mpaign Financing Trust Fund Contribution ( ).	not receive the prior notice.		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) Delete CASTRO, ALBA S 19 WEST FLAGLER STREET STE 605 MIAMI, FL 33130	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () Delete HENAO, DIEGO D 19 WEST FLAGLER STREET STE 605 MIAMI, FL 33130	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete DIEZ CASTRO, PAULA T 19 WEST FLAGLER STREET STE 605 MIAMI, FL 33130	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete DIEZ CASTRO, DIEGO A 19 WEST FLAGLER STREET STE 605 MIAMI, FL 33130	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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 HENAO P/D 08/23/2004