2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUN 10 AM 8:00

DOCUMENT # P03000101940

1. Entity Name
TIMBERCREEK ASSOCIATES, INC.

Principal Place of Business	Mailing Address
201 ALHAMBRA CIR SUITE 701 CORAL GABLES, FL 33134	201 ALHAMBRA CIR SUITE 701 CORAL GABLES, FL 33134

06082004 Chg-P CR2E034 (10/03) MRD

2. Principal Place of Business	3. Mailing Address
9495 SUNSET DRV.	9495 SUNSET DRV.
Suite, Apt. #, etc.: B-230	Suite, Apt. #, etc.: B-230
City & State: MIAMI FLORIDA	City & State: MIAMI FLORIDA
Zip: 33173 Country: USA	Zip: 33173 Country: USA

4. FEI Number 33-1070518 ☐ 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
DE LA OSA, JORGE L 201 ALHAMBRA CIR SUITE 701 CORAL GABLES, FL 33134	Name: SUEIRAS, VIVIAN Street Address (P.O. Box Number is Not Acceptable): 9495 SUNSET DRV, STE. B-230 City: MIAMI FL Zip Code: 33173

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 _____ 6-8-2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD DE LA OSA, JORGE L 201 ALHAMBRA CIR SUITE 701 CORAL GABLES, FL 33134	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD ALBERT SUEIRAS 9495 SUNSET DRV. # B-230 MIAMI FL 33173	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD JIMENEZ, REINALDO I JR. 6917 NW 46TH ST MIAMI, FL 33166	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD VIVIAN SUEIRAS 9495 SUNSET DRV. # B-230 MIAMI FL 33173	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	900038020649 06/16/04--01059--002 **61.25	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: _____ 6/8/04 (305) 279-7655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #