

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 04, 2004 8:00 am**  
**Secretary of State**

05-18-2004 90002 019 \*\*\*150.00

**DOCUMENT # P03000102792**

1. Entity Name  
**PESCAYO DEVELOPMENT, INC.**



Principal Place of Business  
**1207 SOUTH ALHAMBRA CIRCLE  
CORAL GABLES, FL 33146**

Mailing Address  
**1207 SOUTH ALHAMBRA CIRCLE  
CORAL GABLES, FL 33146**

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

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

06022004 Chg-P CR2E034 (10/03)

4. FEI Number  
**20-0325537**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
**ALVAREZ, ARANIS  
1207 SOUTH ALHAMBRA CIRCLE  
CORAL GABLES, FL 33146**

7. Name and Address of New Registered Agent  
Name **ALVAREZ ARAMIS (NAME CORRECTION)**  
Street Address (P.O. Box Number is Not Acceptable) **SAME**  
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]* DATE **JUNE 2/04**

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

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

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

10. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>ALVAREZ, ARANIS</b>	
STREET ADDRESS	<b>1207 SOUTH ALHAMBRA CIRCLE</b>	
CITY-ST-ZIP	<b>CORAL GABLES, FL 33146</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>BERMUDEZ, JUAN J</b>	
STREET ADDRESS	<b>2333 BRICKELL AVENUE APT. 2801</b>	
CITY-ST-ZIP	<b>MIAMI, FL 33129</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ALVAREZ ARAMIS</b>	
STREET ADDRESS	<b>SAME</b>	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: *[Signature]* DATE **JUNE 2/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT 664.26634  
# P03000102792

June 2, 2004

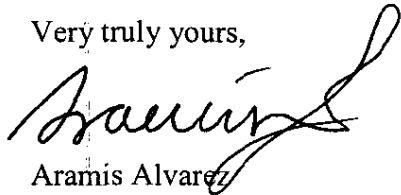
Division of Corporations  
PO BOX 1500  
Tallahassee, FL 32302-1500

Gentlemen:

As per your request find signed annual report for 2004 for Pescayo Development, Inc.  
The FEI number has been also added to the form. The \$150.00 fee has already been paid.

Should you have any questions please contact me.

Very truly yours,



Aramis Alvarez