

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105930

Entity Name: PFE OF MIAMI INC

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

PO BOX 832313
MIAMI, FL 33283 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 832313
MIAMI, FL 33283 US

New Mailing Address:

FEI Number: 41-2109891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTAY, PATRICIA F
8550 SW 109TH AVE
#109
MIAMI, FL 33173 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: PVS () Delete
Name: ESTAY, PATRICIA F
Address: 8600 SW 109 TH AVE #224
City-St-Zip: MIAMI, FL 33173 US

Title: T () Delete
Name: ESTAY, JUAN I
Address: 8600 SW 109TH AVE #224
City-St-Zip: MIAMI, FL 33173 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVS (X) Change () Addition
Name: ESTAY, PATRICIA F
Address: 8550 SW 109 TH AVE #109
City-St-Zip: MIAMI, FL 33173 US

Title: T (X) Change () Addition
Name: ESTAY, JUAN I
Address: 8550SW 109TH AVE #109
City-St-Zip: MIAMI, FL 33173 US

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: PATRICIA ESTAY

PVS

04/30/2005

Electronic Signature of Signing Officer or Director

Date