


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2004 8:00 am
Secretary of State

03-18-2004 90020 016 ***158.75

DOCUMENT # P03000113088 1. Entity Name: MATRIX DESIGN CONCRETE, CORP.																																					
Principal Place of Business 19754 NW 61 AVE MIAMI, FL 33015				Mailing Address 19754 NW 61 AVE MIAMI, FL 33015																																	
2. Principal Place of Business 2033 W. 62nd St		3. Mailing Address 2033 W. 62nd St.																																			
Suite, Apt. #, etc. 238		Suite, Apt. #, etc. 2-38																																			
City & State Hialeah, FL		City & State Hialeah, FL																																			
Zip 33016	Country Dade	Zip 33016	Country Dade																																		
6. Name and Address of Current Registered Agent NAVAS, MARTHA 19754 NW 61 AVE MIAMI, FL 33015				7. Name and Address of New Registered Agent Name Jairo Aguilar Street Address (P.O. Box Number is Not Acceptable) 2033 W. 62nd St. City Hialeah FL Zip Code 33016																																	
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: <i>[Signature]</i> DAIRO AGUILAR 3/10/04 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																		
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> PD NAVAS, MARTHA 19754 NW 61 AVE MIAMI, FL 33015 <input checked="" type="checkbox"/> Delete </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NAVAS, MARTHA 19754 NW 61 AVE MIAMI, FL 33015 <input checked="" type="checkbox"/> Delete															11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> PD Aguilar, Jairo 2033 W. 62nd Street Hialeah, FL 33016 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Aguilar, Jairo 2033 W. 62nd Street Hialeah, FL 33016 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition														
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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 and all other like empowered. SIGNATURE: <i>[Signature]</i> DAIRO AGUILAR 3/10/04 786-255-8885 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																					

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