2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 08, 2004 8:00 am Secretary of State 07-08-2004 90189 041 ***150.00

Zip Zip MARSHALL, IXORA I MIAMI, FL 3	tive 181 Compared to the second of the seco	Country US 4 d Address of Current F	Mailing Address 2TT IXORA DRIVE MIAMI, FL 33181 3. Mailing Address Suite, Apt. #, etc. City & State Zip 33181 August Apt. # August App.	Country USA Name Street Add	07012004 4. FEI Numbo	of Status Desired Address of New F	CR2E034 (10) 451-6 S8.75 Fee Re Registered Agent	/03) Applied For Not Applicable Additional
MIAMI, FL 331 2. Principal Place Suite, Apt. #, City & State Zip ARSHALL, IXORA I MIAMI, FL 3 8. The above not the obligation SIGNATURE	nce of Business M (AM) 5. Name an CAROL 33181	Country US 4 d Address of Current F	MIAMI, FL 33181 RA RA RA Suite, Apt. #, etc. City & State Zip Zip Zip Registered Agent	Country USA Name Street Add	07012004 4. FEI Numbi 2 3 - 8 5. Certificate 7. Name and	Chg-P Of 2967 of Status Desired Address of New F	CR2E034 (10) 451-6 S8.75 Fee Re Registered Agent	/03) Applied For Not Applicable Additional
Suite, Apt. #, City & State Zip MARSHALL LIXORA I MIAMI, FL 3	6. Name and CAROL	Country US 4 d Address of Current F	Suite, Apt. #, etc. City & State M Zip 33181 Registered Agent	Country USA Name Street Add	07012004 4. FEI Numbi 2 3 - 8 5. Certificate 7. Name and	Chg-P Of 2967 of Status Desired Address of New F	CR2E034 (10) 451-6 S8.75 Fee Re Registered Agent	/03) Applied For Not Applicable Additional
Suite, Apt. #, City & State Zip MARSHALL LIXORA I MIAMI, FL 3	6. Name and CAROL	Country US 4 d Address of Current F	Suite, Apt. #, etc. City & State M Zip 33181 Registered Agent	Country USA Name Street Add	07012004 4. FEI Numbi 2 3 - 8 5. Certificate 7. Name and	Chg-P Of 2967 of Status Desired Address of New F	CR2E034 (10) 451-6 S8.75 Fee Re Registered Agent	/03) Applied For Not Applicable Additional
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Zip Zip MARSHALL, IXORA I MIAMI, FL 3	5. Name and CAROL 33181	Address of Current F	Zip 3318/ Registered Agent	Country USA Name Street Add	Certificate Name and	of Status Desired Address of New F	S8.75 Fee Re	
MARSHALL, IXORA I MIAMI, FL 3	, CAROL 33181	Address of Current F	Registered Agent	- Name - Street Add	7. Name and		Registered Agent	2-3
8. The above not the obligation	33181	bmits this statement for	FOM RD.	Street Add	dress (P.O. Box Numb	er is Not Acceptable	9)	a-T.5
MIAMI, FL 3 8. The above not the obligation SIGNATURE	33181	bmits this statement for	FOM RD.		dress (P.O. Box Numb	er is Not Acceptable	9)	
The above not the obligation SIGNATURE	named entity su	ibmits this statement for		020				
the obligation	named entity su ons of registere	bmits this statement for d agent						<u> </u>
the obligation	named entity su ons of registere	bmits this statement for d agent		City			<u> </u>	Code
	is in		the purpose of changing its	registered office or re	egistered agent, or bo	th, in the State of Fl	orida. Tam familiar	with, and accept
		1 .	٠					
	Signature, typed or p	inted name of registered agent a	nd title if applicable. (NOT	E: Registered Agent signature	required when remetaling)		DATE **	
		EE IS \$150.00 mber 8, 2004	9. Election Campa Trust Fund Con		\$5.00 May Be Added to Fees	In accordance corporation did	with s. 607.193(2 not receive the p)(b), F.S., the rior notice.
10.	D ;	OFFICERS AND		11.	ADDITIONS	CHANGES TO OFF		
NAME I	MARSHALL	VETRONE, CAROLE		TITLE - NAME			☐ Ch	ange Addition
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Indicated o	on this report o	r supplemental report is	this filing does not qualify for true and accurate and that	my signature shall ha	ve the same legal effe	ct as if made under	oath; that I am an c	officer or director
of the corpo	oration or the r or on an attach	eceiver or trustee empo ment with an address, v	wered to execute this repor with all other like empowered	t as required by Chap I.	ter 607, Floridā Statut	es; and that my nan	ne appears in Block	: 10 or Block 11 if
SIGNATU	URE:	Pend	(-//bin	fall		7/3/04	305 F	93.606