

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 03, 2005  
Secretary of State**

DOCUMENT# P03000136919

Entity Name: MOUNT PHOENIX, INC.

**Current Principal Place of Business:**

3436 NW 17 ST  
MIAMI, FL 33125

**New Principal Place of Business:**

**Current Mailing Address:**

3436 NW 17 ST  
MIAMI, FL 33125

**New Mailing Address:**

FEI Number: 20-0414136      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MONTES, JOSE  
3436 NW 17 ST  
MIAMI, FL 33125      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: PD ( ) Delete  
Name: MONTES, JOSE  
Address: 3436 NW 17TH ST  
City-St-Zip: MIAMI, FL 33125

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSE MONTES

PD

02/03/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date