

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137732

Entity Name: LIAISON ENTERPRISES, INC.

FILED
Jan 07, 2005
Secretary of State

Current Principal Place of Business:

7214 SW 149TH CT.
MIAMI, FL 33193

New Principal Place of Business:

Current Mailing Address:

7214 SW 149TH CT.
MIAMI, FL 33193

New Mailing Address:

FEI Number: 20-0147378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALFONSO, RUBEN
7214 SW 149TH CT.
MIAMI, FL 33193 US

Name and Address of New Registered Agent:

ALFONSO, RUBEN
14026 SW 151 CT
MIAMI, FL 33196 US

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: RUBEN ALFONSO

01/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALFONSO, RUBEN
Address: 7214 SW 149TH CT.
City-St-Zip: MIAMI, FL 33193

Title: SD () Delete
Name: ALFONSO, ERICH J
Address: 6803 SW 152ND CT., #36-03
City-St-Zip: MIAMI, FL 33197

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALFONSO, RUBEN
Address: 14026 SW 151 CT
City-St-Zip: MIAMI, FL 33196

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: RUBEN ALFONSO

PD

01/07/2005

Electronic Signature of Signing Officer or Director

Date