

2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
May 27, 2005
Secretary of State**

DOCUMENT# P03000142141

Entity Name: BEATRIZ POINCOT, INC.

Current Principal Place of Business:

9553 SW 125TH TERRACE
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

PO BOX 560306
MIAMI, FL 33256

New Mailing Address:

FEI Number: 83-0383153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POINCOT, BEATRIZ C
9553 SW 125TH TERRACE
MIAMI, FL 33176 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POINCOT, BEATIZ C
Address: 9553 SW 125TH TERRACE
City-St-Zip: MIAMI, FL 33176

Title: VP () Delete
Name: POINCOT, GEORGE R
Address: 9553 SW 125TH TERRACE
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: GEORGE POINCOT

VP

05/27/2005

Electronic Signature of Signing Officer or Director

_____ Date