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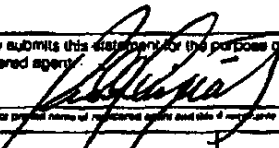
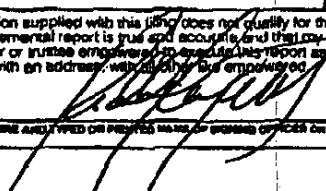
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**FILED**  
**May 10, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90273 018 \*\*\*150.00

**2004 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                        |                                                                                                                                                                                                                                           |                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # P03000146138</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                        |                                                                                                                                                          |                                                                   |
| 1. Entity Name<br><b>NAVIDAD HOLDING, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                        |                                                                                                                                                                                                                                           |                                                                   |
| Principal Place of Business<br>901 PONCE DE LEON BLVD., STE. 603<br>CORAL GABLES, FL 33134                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                        | Mailing Address<br>901 PONCE DE LEON BLVD., STE. 603<br>CORAL GABLES, FL 33134                                                                                                                                                            |                                                                   |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                        | 3. Mailing Address<br>Suite, Apt. #, etc.                                                                                                                                                                                                 |                                                                   |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                        | City & State                                                                                                                                                                                                                              |                                                                   |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Country                                                                                                | Zip                                                                                                                                                                                                                                       | Country                                                           |
| 4. Name and Address of Current Registered Agent<br><b>ALBORNOZ, WILLIAM H ESQ.<br/>901 PONCE DE LEON BLVD., STE. 603<br/>CORAL GABLES, FL 33134</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                        | 5. Name and Address of New Registered Agent<br>Name: <b>RICARDO MUNOZ-TEBAR</b><br>Street Address (P.O. Box Number is Not Acceptable): <b>1250 E HALLANDALE BEACH BLVD SUITE 900</b><br>City: <b>HALLANDALE</b> FL Zip Code: <b>33009</b> |                                                                   |
| 6. 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:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                        | DATE: <b>03/10/04</b>                                                                                                                                                                                                                     |                                                                   |
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2004 Fee will be \$250.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                        | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be<br>Added to Fees                                                                                                                        |                                                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                        | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                                                                     |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>D<br/>RIOS, MARIA I<br/>1250 E. HALLANDALE BEACH BLVD., STE. 900<br/>HALLANDALE BEACH, FL 33009</b> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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 any additions 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 as changed, or on an attachment with an address, when actually employed. |                                                                                                        |                                                                                                                                                                                                                                           |                                                                   |
| SIGNATURE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                        | DATE: <b>03/10/04</b> (954) 822-4838                                                                                                                                                                                                      |                                                                   |

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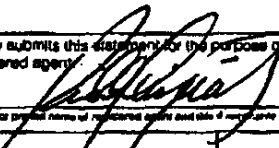
4. FEI Number ☒ Applied For  
☐ Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALBORNOZ, WILLIAM H ESQ.  
901 PONCE DE LEON BLVD., STE. 603  
CORAL GABLES, FL 33134Name: **RICARDO MUNOZ-TEBAR**  
Street Address (P.O. Box Number is Not Acceptable): **1250 E HALLANDALE BEACH BLVD SUITE 900**  
City: **HALLANDALE** FL Zip Code: **33009**

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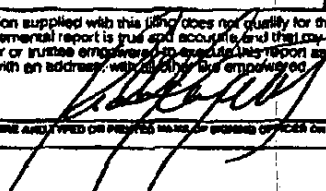
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10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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CITY - ST - ZIP  
**D  
RIOS, MARIA I  
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HALLANDALE BEACH, FL 33009**TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ AdditionTITLE  
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SIGNATURE: DATE: **03/10/04** (954) 822-4838