## 2005 FOR PROFIT CORPORATION

FILE	D
Apr 25, 2005	08:00 AM
Secretary	

ANNUAL REPORT				Secretary of State			
1. Entity Nam		291			2001	vary or a vacc	
CARRIZA	ALES BROTHER'S INC.						
Principal Plac	e of Business	Mailing Address					
2912 N. PIN		2912 N. PINEWAY DRIVE					
PLANT CITY,	FL 33566 US	PLANT CITY, FL 33566 US					
		······	oostaliina				
	والمراوية والمستعمل والمراوية والمراوية والمراوية والمراوية				I [		
		gijingerişirikinderEstdeficidi. Dad Taranar oğumlarının ber	AMARAKANAN Kalentan	04202005	No Chg-P	CR2E034 (10/03)	
	O NOT WRITE	IN THIS SPA	CE				
				4. FEI Numbe 20-0476		Applied For Not Applicable	
				5. Certificate	of Status Desired	\$8.75 Additional	
<u></u>	6. Name and Address of Current I	Registered Agent				Fee Required	
				1		in the state of th	
	LES, LEOVIGILDO INEWAY DRIVE			DO	<b>NOT W</b>	RITE	
	TY, FL 33566						
				IIN	HIS SF	ACE.	
				7777		,	
	named entity submits this statement for flons of registered agent.	the purpose of changing its register	ed office or register	ed agent, or bot	h, in the State of Flo	orida. I am familiar with, and accept	
SIGNATURE.							
	Signature, typed or printed name of registered agent a	nd title d applicable. (NOTE, Registere	ed Agent signature required	(when re-instating)		DATE	
	.E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	S. Election Campaign Fina     Trust Fund Contribution.	ncing \$5.	.00 May Be ed to Fees			
						<del>, , , , , , , , , , , , , , , , , , , </del>	
10.	OFFICERS AND	DIRECTORS	1				
NAME	CARRIZALES, LEOVIGILDO				Umaac	<b>ጎር፥ጣተነ</b> ው ጭማጣ	
STREET ADDRESS	2912 N, PINEWAY DRIVE				0472570	)0328237 5-80069-018 158.75	
CITY-ST-ZIP	PLANT CITY, FL 33566			- 1	THE PART OF THE PA	i hinda hin Inn. 19	
NAME	CARRIZALES, LEOVIGILDO					ner na na santa da s Na santa da	
STREET ADDRESS	2912 N. PINEWAY DRIVE		.:::1222222				
CITY-ST-ZIP	PLANT CITY, FL 33566		17.5.00	munitari Cestis takan kanan			
TITLE NAME	T ALVARADO, JAIME						
STREET ADDRESS	2912 N. PINEWAY DRIVE			<b>D</b> O	NOT 18	S Early Radio Inc.	
CITY-ST-ZIP	PLANT CITY, FL 33566				NOT W	KILE	
TITLE	S CAPPIZALES ALONSO			IN 7	THIS SE	PACE	
NAME STREET ADDRESS	CARRIZALES, ALONSO 2912 N. PINEWAY DRIVE						
CITY-ST-ZIP	PLANT CITY, FL 33566		, ,,,,(;;)				
TITLE		——————————————————————————————————————		#[ # 1			
NAME STREET ADDRESS	-		11-113-1				
STREET ADDRESS CITY-ST-ZIP							
TITLE			• • • • • • • • • • • • • • • • • • • •	.ure.ara Britiski Pransti vitanst			
	1		I				

12. Thereby certify that the information supplied with this filling 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 my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Leongelas Corrigales
SIGNATURE AND PPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR