

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000005653

**FILED**  
**Apr 30, 2005**  
**Secretary of State**

**Entity Name:** THE DREAM FENCE CORP.

**Current Principal Place of Business:**

10625 HAMMOCKS BLVD APT 523  
MIAMI, FL 33196

**New Principal Place of Business:**

8860 SW 130 PLACE  
MIAMI, FL 33186

**Current Mailing Address:**

10625 HAMMOCKS BLVD APT 523  
MIAMI, FL 33196

**New Mailing Address:**

8860 SW 130 PLACE  
MIAMI, FL 33186

**FEI Number:** 20-0655404

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SALAZAR, AGUSTIN  
10625 HAMMOCKS BLVD APT 523  
MIAMI, FL 33196 US

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

SALAZAR, AGUSTIN J  
8860 SW 130 PLACE  
MIAMI, FL 33186 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:** AGUSTIN SALAZAR

04/30/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** SALAZAR, AGUSTIN  
**Address:** 10625 HAMMOCKS BLVD APT 523  
**City-St-Zip:** MIAMI, FL 33196

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

**Title:** P (X) Change ( ) Addition  
**Name:** SALAZAR, AGUSTIN J  
**Address:** 8860 SW 130 PLACE  
**City-St-Zip:** MIAMI, FL 33186

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:** AGUSTIN SALAZAR

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date