

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000012445

Entity Name: 1004 CORP.

FILED
May 09, 2005
Secretary of State

Current Principal Place of Business:

2401 ANDERSON ROAD
APARTMENT 1
CORAL GABLES, FL 33134

New Principal Place of Business:

P.O. BOX 43-1329
MIAMI, FL 33143

Current Mailing Address:

2401 ANDERSON ROAD
APARTMENT 1
CORAL GABLES, FL 33134

New Mailing Address:

P.O. BOX 43-1329
MIAMI, FL 33143

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBSON, ROBERT
1500 SAN REMO AVE.
350
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

SOLOMON, CAROL
1900 WEST COMMERCIAL BLVD.
SUITE 137
FT. LAUDERDALE, FL 33309 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: CAROL SOLOMON

05/09/2005

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: JACOBSON, ROBERT
Address: 1500 SAN REMO AVE.#350
City-St-Zip: CORAL GABLES, FL 33146

Title: VP () Delete
Name: JACOBSON, MARITZA
Address: 1500 SAN REMO AVE.#350
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JACOBSON, ROBERT
Address: P.O. BOX 43-1329
City-St-Zip: MIAMI, FL 33143

Title: VDS (X) Change () Addition
Name: JACOBSON, MARITZA
Address: P.O. BOX 43-1329
City-St-Zip: MIAMI, FL 33143

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: MARITZA JACOBSON

VDS

05/09/2005

Electronic Signature of Signing Officer or Director

Date