2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2005
Secretary of State

DOCUMENT# P04000017874

Entity Name: GUARENAS AND ASSOCIATES, CORP.

Current Principal Place of Business:

1100 OAKBRIDGE PARKWAY
SUITE 68
LAKELAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

2 WEST MAIN STREET
AVON PARK, FL 33825

New Mailing Address:

1100 OAKBRIDGE PARKWAY
SUITE 68
LAKELAND, FL 33803

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

Name and Address of Current Registered Agent:

PACHECKER, HUMPHREY
2 WEST MAIN STREET
AVON PARK, FL 33825 US

Name and Address of New Registered Agent:

GUARENAS, EMYL A
1100 OAKBRIDGE PARKWAY
SUITE 68
LAKELAND, FL 33803 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: EMYL A. GUARENAS 04/24/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GUARENAS ORDONEZ, EMYL A
Address: 1100 OAKBRIDGE PARKWAY SUITE 68
City-St-Zip: LAKELAND, FL 33803

Title: V ( ) Delete
Name: GUARENAS, JULIO A
Address: 1100 OAKBRIDGE PARKWAY SUITE 68
City-St-Zip: LAKELAND, FL 33803

Title: ST ( ) Delete
Name: GUARENAS, LASTENIA
Address: 1100 OAKBRIDGE PARKWAY SUITE 68
City-St-Zip: LAKELAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GUARENAS, EMYL A
Address: 1100 OAKBRIDGE PARKWAY SUITE 68
City-St-Zip: LAKELAND, FL 33803

Title: V (X) Change ( ) Addition
Name: SALAZAR, MICHAEL G
Address: 1100 OAKBRIDGE PARKWAY SUITE 68
City-St-Zip: LAKELAND, FL 33803

Title: ST (X) Change ( ) Addition
Name: GUARENAS, JULIO
Address: 1100 OAKBRIDGE PARKWAY SUITE 68
City-St-Zip: LAKELAND, FL 33803

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: EMYL A. GUARENAS P 04/24/2005
Electronic Signature of Signing Officer or Director Date