

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000024266

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: LILLIAN DE LOS SANTOS, P.A.

## Current Principal Place of Business:

8997 NW 187 ST  
MIAMI, FL 33018

## New Principal Place of Business:

8994 NW 187 ST  
MIAMI, FL 33018

## Current Mailing Address:

8997 NW 187 ST  
MIAMI, FL 33018

## New Mailing Address:

8994 NW 187 ST  
MIAMI, FL 33018

FEI Number: 68-0582111

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DE LOS SANTOS, LILLIAN  
8997 NW 187 ST  
MIAMI, FL 33018 US

## Name and Address of New Registered Agent:

DE LOS SANTOS, LILLIAN  
8994 NW 187 ST  
MIAMI, FL 33018 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/28/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DE LOS SANTOS, LILLIAN  
Address: 8997 NW 187 ST  
City-St-Zip: MIAMI, FL 33018

Title: D ( ) Delete  
Name: DE LOS SANTOS, BERNARDINO  
Address: 8997 NW 187 ST  
City-St-Zip: MIAMI, FL 33018

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DE LOS SANTOS, LILLIAN  
Address: 8994 NW 187 ST  
City-St-Zip: MIAMI, FL 33018

Title: D (X) Change ( ) Addition  
Name: DE LOS SANTOS, BERNARDINO  
Address: 8994 NW 187 ST  
City-St-Zip: MIAMI, FL 33018

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: LILLIAN DE LOS SANTOS

Electronic Signature of Signing Officer or Director

MRS.

04/28/2005

Date