

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032479

Entity Name: SAECO, CORP.

FILED
Apr 12, 2005
Secretary of State

Current Principal Place of Business:

17300 NW 68TH AVENUE
204
HIALEAH, FL 33015

New Principal Place of Business:

Current Mailing Address:

17300 NW 68TH AVENUE
204
HIALEAH, FL 33015

New Mailing Address:

FEI Number: 20-0936253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX DEFENSE CENTER, INC.
2350 W 84TH STREET
20
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

ESCOBAR, MARIA S.V.P.
17300 NW 68TH AVE.
204
HIALEAH, FL 33015 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: MARIA SANDRA ESCOBAR 04/12/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SANCHEZ, JUAN C
Address: 17300 NW 68TH AVENUE
City-St-Zip: HIALEAH, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V.P. () Delete
Name: ESCOBAR, MARIA S
Address: 17300 NW 68TH AVENUE
City-St-Zip: HIALEAH, FL 33015

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JUAN C. SANCHEZ P 04/12/2005
Electronic Signature of Signing Officer or Director Date