

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000048643

FILED
May 01, 2005
Secretary of State

Entity Name: PEREIRA & SOARES CORPORATION

Current Principal Place of Business:

5460 2ND AVENUE
FORT MYERS, FL 33907

New Principal Place of Business:

408 SE 17TH STREET
CAPE CORAL, FL 33990

Current Mailing Address:

5460 2ND AVENUE
FORT MYERS, FL 33907

New Mailing Address:

408 SE 17TH STREET
CAPE CORAL, FL 33990

FEI Number: 20-0876173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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

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: PD () Delete
Name: SOARES, ELISAMA P
Address: 5460 2ND AVENUE
City-St-Zip: FORT MYERS, FL 33907

Title: VD () Delete
Name: PEREIRA, DANIEL
Address: 5460 2ND AVENUE
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SOARES, ELISAMA P
Address: 408 SE 17TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: VD (X) Change () Addition
Name: PEREIRA, DANIEL
Address: 408 SE 17TH STREET
City-St-Zip: CAPE CORAL, FL 33990

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: ELISAMA PATRICIA SOARES

PD

05/01/2005

Electronic Signature of Signing Officer or Director

Date