2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000071175

Entity Name: MAHARB, CORP

City-St-Zip:

MIAMI, FL 33172

FILED Jul 19, 2005 Secretary of State

Entity Nar	ne: Maharb	CORP.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1455 NW 107TH AVE MIAMI, FL 33172			1455 NW 107TH AVE 674 MIAMI, FL 33172		
Current M	ailing Addres	s:	New Mailing Address	New Mailing Address:	
1455 NW 107TH AVE MIAMI, FL 33172			1455 NW 107TH AVE 674 MIAMI, FL 33172	674	
FEI Number:	27-0088914	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
NUNEZ, DAVID ARMANDO 1455 NW 107TH AVE MIAMI, FL 33172 US			9050 PINES BLVD. 450		
	named entity s of Florida.	submits this statement for the po	urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: NAYARIT	BRICENO		07/19/2005	
	Electron	ic Signature of Registered Age	nt	Date	
		8(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS	S AND DIREC	FORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () MARINO, JUDIT 1455 NW 107TH MIAMI, FL 3317	1 AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) HARB, JAVIER 1455 NW 107TH MIAMI, FL 3317		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () NUNEZ, ARNAL 1455 NW 107Th		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: ARNALDO NUNEZ D 07/19/2005