

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000118015

FILED
Apr 29, 2005
Secretary of State

Entity Name: CARRANZA ENTERPRISE INTERNATIONAL, INC.

Current Principal Place of Business:

100 SWANNEE AVE
BRANFORD, FL 32008

New Principal Place of Business:

106 SWANNEE AVE
BRANFORD, FL 32008

Current Mailing Address:

100 SWANNEE AVE
BRANFORD, FL 32008

New Mailing Address:

P. O. BOX 179
BRANFORD, FL 32008

FEI Number: 86-1113634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MANGUAL, CARLOS
8815 NW 33 AVE ROAD
MIAMI, FL 33147 US

Name and Address of New Registered Agent:

MANGUAL, CARLOS
230 S HWY 129
BELL, FL 32619 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: CARLOS MANGUAL

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARRANZA, WALTER
Address: 2986 NW 93 STREET
City-St-Zip: MIAMI, FL 33147

Title: VP () Delete
Name: CARRANZA, ANA M
Address: 240 SOUTH HWY 129
City-St-Zip: BELL, FL 32619

Title: ST () Delete
Name: GOMEZ, NELLY G
Address: 100 SWANNEE AVE
City-St-Zip: BRANFORD, FL 32008

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARRANZA, WALTER
Address: 250 S HWY 129
City-St-Zip: BELL, FL 32619

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

Title: ST (X) Change () Addition
Name: GOMEZ, NELLY G
Address: 230 S HWY 129
City-St-Zip: BELL, FL 32619

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: NELLY GOMEZ

ST

04/29/2005

Electronic Signature of Signing Officer or Director

Date