

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120748

FILED  
Sep 06, 2005  
Secretary of State

Entity Name: PROVIDIAN REAL ESTATE GROUP, INC.

## Current Principal Place of Business:

11300 NW 87 COURT  
SUITE 150  
HIALEAH GARDENS, FL 33018 US

## New Principal Place of Business:

## Current Mailing Address:

11300 NW 87 COURT  
SUITE 150  
HIALEAH GARDENS, FL 33018 US

## New Mailing Address:

FEI Number: 20-1717413      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CALVO, MARILAYNA  
140 E 62 ST  
HIALEAH, FL 33013 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: P ( ) Delete  
Name: CALVO, MARILAYNA  
Address: 140 E 62 ST  
City-St-Zip: HIALEAH, FL 33013 US

Title: VP ( ) Delete  
Name: GONZALEZ, HUMBERTO  
Address: 11300 NW 87 CT SUITE 150  
City-St-Zip: HIALEAH GARDENS, FL 33018 US

Title: T ( ) Delete  
Name: CALVO, MARILAYNA  
Address: 140 E 62 ST  
City-St-Zip: HIALEAH, FL 33013

Title: S ( ) Delete  
Name: CALVO, MARILAYNA  
Address: 140 E 62 ST  
City-St-Zip: HIALEAH, FL 33013

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MARILAYNA CALVO

P

09/06/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date