

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000124073

FILED
Jun 30, 2005
Secretary of State

Entity Name: EL VENEZOLANO DE BROWARD, CORP.

Current Principal Place of Business:

9050 PINES BLVD STE 480
PEMBROKE PINES, FL 33024

New Principal Place of Business:

9050 PINES BLVD STE 415
PEMBROKE PINES, FL 33024

Current Mailing Address:

9050 PINES BLVD STE 480
PEMBROKE PINES, FL 33024

New Mailing Address:

9050 PINES BLVD STE 415
PEMBROKE PINES, FL 33024

FEI Number: 20-1556054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BELLO, SILVA
9050 PINES BLVD STE 480
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

BELLO, SILVA
9050 PINES BLVD STE 415
PEMBROKE PINES, FL 33024 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:

06/30/2005

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: D () Delete
Name: BELLO, SILVA
Address: 9050 PINES BLVD STE 480
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D () Delete
Name: MUNOZ, ISABEL
Address: 9050 PINES BLVD STE 480
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BELLO, SILVA
Address: 9050 PINES BLVD STE 415
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D (X) Change () Addition
Name: MUNOZ, ISABEL
Address: 9050 PINES BLVD STE 415
City-St-Zip: PEMBROKE PINES, FL 33024

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: SYLVIA BELLO

D

06/30/2005

Electronic Signature of Signing Officer or Director

Date