

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000136388

Entity Name: INTI RAYMI, CORP.

FILED  
Mar 19, 2005  
Secretary of State

## Current Principal Place of Business:

3501 W VINE STREET SUITE 329  
KISSIMMEE, FL 34741

## New Principal Place of Business:

617 EAGLE POINTE SOUTH  
KISSIMMEE, FL 34746

## Current Mailing Address:

3501 W VINE STREET SUITE 329  
KISSIMMEE, FL 34741

## New Mailing Address:

617 EAGLE POINTE SOUTH  
KISSIMMEE, FL 34746

FEI Number: 20-1715033

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORAN, MILOUSKA  
3501 W VINE STREET SUITE 329  
KISSIMMEE, FL 34741 US

## Name and Address of New Registered Agent:

CORPORAN, MILOUSKA  
617 EAGLE POINTE SOUTH  
KISSIMMEE, FL 34746 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: MILOUSKA CORPORAN

03/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: CORPORAN, MILOUSKA  
Address: 671 EAGLE POINT SOUTH  
City-St-Zip: KISSIMMEE, FL 34746

Title: DV ( ) Delete  
Name: FREYRE, JAIME  
Address: 671 EAGLE POINT SOUTH  
City-St-Zip: KISSIMMEE, FL 34746

Title: DT (X) Delete  
Name: CORPORAN, RODOLFO  
Address: 671 EAGLE POINT SOUTH  
City-St-Zip: KISSIMMEE, FL 34746

Title: DT (X) Delete  
Name: KENNIS, RODLOFO  
Address: 671 EAGLE POINT SOUTH  
City-St-Zip: KISSIMMEE, FL 34746

Title: T (X) Delete  
Name: PANODI, ISABEL  
Address: 671 EAGLE POINT SOUTH  
City-St-Zip: KISSIMMEE, FL 34746

Title: DT (X) Delete  
Name: AMBOCO, MELISSA  
Address: 671 EAGLE POINT SOUTH  
City-St-Zip: KISSIMMEE, FL 34746

## 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:

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: MILOUSKA CORPORAN

DP

03/19/2005

Electronic Signature of Signing Officer or Director

Date