2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# P04000138825

Entity Name: ARIAS TOVAR INCORPORATED

Current Principal Place of Business:

1725 MAIN STREET
SUITE 209
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

1725 MAIN STREET
SUITE 209
WESTON, FL 33326

New Mailing Address:

FEI Number: 20-2751217 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOVAR, ILEANA ARIAS
ARIAS TOVAR & ASSOCIATES, P.A.
1725 MAIN STREET, SUITE 209
WESTON, FL 33326 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: TOVAR, JOSE G
Address: 1900 NW 168TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VSD ( ) Delete
Name: TOVAR, ILEANA
Address: 1900 NW 168TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D ( ) Delete
Name: TOVAR DEL CORRAL, JOSE G
Address: 1900 NW 168TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D ( ) Delete
Name: TOVAR, ILEANA ARIAS
Address: 1900 NW 168TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

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: JOSE GREGORIO TOVAR PT 04/28/2005

Electronic Signature of Signing Officer or Director — Date