



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2005 8:00 am
Secretary of State

09-02-2005 90011 019 ***150.00

DOCUMENT # P04000146999 1. Entity Name CRUZALEGUI, INC. <i>I.D. Tax 20-1795657</i>																									
Principal Place of Business 1820 SPREAKLEY COURT ORLANDO, FL 32837			Mailing Address 1820 SPREAKLEY COURT ORLANDO, FL 32837																						
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																							
City & State Zip Country		City & State Zip Country		4. FEI Number 08022005 Chg-P CR2E034 (10/03) Applied For <input type="checkbox"/> Not Applicable																					
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent MIASTA, OLGA E 1820 SPREAKLEY COURT ORLANDO, FL 32837																									
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																									
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>+ O. Elvira Mianza +</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> DATE																									
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.																					
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 15%;">P</td> <td style="width: 15%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MIASTA, OLGA E</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1820 SPREAKLEY COURT</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>ORLANDO, FL 32837</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 15%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td><i>MIASTA, OLGA E.</i></td> </tr> <tr> <td>STREET ADDRESS</td> <td><i>1601 Hibiscus Ave.</i></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td><i>WINTER PARK, Florida 32789-1647</i></td> </tr> </table> </div> </div>						TITLE	P	<input type="checkbox"/> Delete	NAME	MIASTA, OLGA E		STREET ADDRESS	1820 SPREAKLEY COURT		CITY-ST-ZIP	ORLANDO, FL 32837		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	<i>MIASTA, OLGA E.</i>	STREET ADDRESS	<i>1601 Hibiscus Ave.</i>	CITY-ST-ZIP	<i>WINTER PARK, Florida 32789-1647</i>
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																									
SIGNATURE: <i>+ O. Elvira Mianza +</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date Daytime Phone #																									

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