

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000148210

Entity Name: OLIFONCA, INC.

FILED
Apr 11, 2005
Secretary of State

Current Principal Place of Business:

13230 SW 58TH TERR
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

13230 SW 58TH TERR
MIAMI, FL 33183

New Mailing Address:

3603 WILDERNESS DR. WEST
FORT PIERCE, FL 34982 US

FEI Number: 20-1806334

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FONSECA, OLIVER U
2330 SAINT LUISE BLVD.
FORT PIERCE, FL 34946 US

Name and Address of New Registered Agent:

TAXPLACE CORP
2721 S. US 1 SUITE 9
FORT PIERCE, FL 34982 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: CLAUDIO RIBEIRO

04/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVT () Delete
Name: FONSECA, OLIVER U
Address: 13230 SW 58TH TERR
City-St-Zip: MIAMI, FL 33183

Title: S () Delete
Name: FONSECA, LYNNETH
Address: 13230 SW 58TH TERR
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVT (X) Change () Addition
Name: FONSECA, OLIVER U
Address: 3603 WILDERNESS DR. WEST
City-St-Zip: FORT PIERCE, FL 34982 US

Title: S (X) Change () Addition
Name: FONSECA, LYNNETH
Address: 3603 WILDERNESS DR. WEST
City-St-Zip: FORT PIERCE, FL 34982 US

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: OLIVER U FONSECA

PVT

04/11/2005

Electronic Signature of Signing Officer or Director

Date