

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164463

FILED  
Feb 24, 2005  
Secretary of State

Entity Name: FOUR FELLOWS INVESTMENT GROUP CORP

## Current Principal Place of Business:

5767 NW 151 STREET  
MIAMI LAKES, FL 33014

## New Principal Place of Business:

## Current Mailing Address:

5767 NW 151 STREET  
MIAMI LAKES, FL 33014

## New Mailing Address:

FEI Number: 20-1972135

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COSSIO, JOAQUIN E  
7572 W 29 WAY  
HIALEAH, FL 33018 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: P ( ) Delete  
Name: DE LA CRUZ, NORMAN  
Address: 12710 SW 107 TERR  
City-St-Zip: MIAMI, FL 33186

Title: VP ( ) Delete  
Name: COSSIO, JOAQUIN E  
Address: 7572 WEST 29 WAY  
City-St-Zip: HIALEAH, FL 33018

Title: TREIA ( ) Delete  
Name: SAENZ, YURI  
Address: 875 W 69 STREET  
City-St-Zip: HIALEAH, FL 33014

Title: DIR ( ) Delete  
Name: GUTIERREZ, JOSE A  
Address: 19106 SW 5 ST  
City-St-Zip: PEMBROKE PINES, FL 33022

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: DE LA CRUZ, NORMAN  
Address: 12710 SW 107 TERR  
City-St-Zip: MIAMI, FL 33186

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DIR (X) Change ( ) Addition  
Name: GUTIERREZ, JOSE A  
Address: 19106 SW 5 ST  
City-St-Zip: PEMBROKE PINES, FL 33029

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 A GUTIERREZ

DR

02/24/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date