

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08098

FILED
Feb 10, 2005
Secretary of State

Entity Name: DANZAS CORPORATION

Current Principal Place of Business:

1200 S PINE ISLAND ROAD
6TH FLOOR (LEGAL DEPT)
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

1200 S PINE ISLAND ROAD
6TH FLOOR (LEGAL DEPT)
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 13-4919031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: S () Delete
Name: OWUSU, VICTOR
Address: 1200 S PINE ISLAND ROAD
City-St-Zip: PLANTATION, FL 33324 US

Title: PD () Delete
Name: TOGGWEILER, HANS
Address: 33 WASHINGTON ST, 16TH FL
City-St-Zip: NEWARK, NJ 07102 US

Title: V () Delete
Name: LINDHOLM, BRIAN
Address: 33 WASHINGTON ST, 16TH FL
City-St-Zip: NEWARK, NJ 07102 US

Title: TD () Delete
Name: NOLAN, STEVEN
Address: 33 WASHINGTON ST, 16TH FL
City-St-Zip: NEWARK, NJ 07102 US

Title: V () Delete
Name: BROWN, DAVID
Address: 120 TOKENEKE RD
City-St-Zip: DARIEN, CT 06820

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:

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: VICTOR OWUSU

SEC

02/10/2005

Electronic Signature of Signing Officer or Director

_____ Date