

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09802

FILED  
Apr 22, 2005  
Secretary of State

Entity Name: AALSMEER ANTIGUA, INC.

## Current Principal Place of Business:

300 SEVILLA AVENUE  
#201  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

## Current Mailing Address:

300 SEVILLA AVENUE  
#201  
CORAL GABLES, FL 33134 US

## New Mailing Address:

FEI Number: 51-0256612      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:

ALONSO, DOMINGO  
300 SEVILLA AVENUE  
201  
CORAL GABLES, FL 33134 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: DOMINGO ALONSO

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CLAY, LAVINIA  
Address: 300 SEVILLA, STE 201  
City-St-Zip: CORAL GABLES, FL 33134

Title: CD ( ) Delete  
Name: CLAY, LANDON  
Address: 2019 NW 89 PLACE  
City-St-Zip: MIAMI, FL 33172

Title: CFO ( ) Delete  
Name: ALONSO, DOMINGO  
Address: 2019 NW 89 PLACE  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: CFO (X) Change ( ) Addition  
Name: ALONSO, DOMINGO  
Address: 300 SEVILLA AVENUE, SUITE 201  
City-St-Zip: CORAL GABLES, FL 33134 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: LAVINIA CLAY

P

04/22/2005

Electronic Signature of Signing Officer or Director

Date