

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000004916

FILED
Apr 29, 2004
Secretary of State

Entity Name: CONSUEGRA, INC.

Current Principal Place of Business:

2837 SW 25 ST
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

8500 W FLAGLER STREET, SUITE B-208
C/O HERNANDEZ TACORONTE
MIAMI, FL 33144

New Mailing Address:

FEI Number: 65-0369337

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSUEGRA, MANUEL
6380 W 24 CT #101
HIALEAH, FL 33016 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: PD () Delete
Name: CONSUEGRA, MANUEL
Address: 2837 SW 25 ST
City-St-Zip: MIAMI, FL 33133

Title: VD () Delete
Name: CONSUEGRA, FRANCISCO
Address: 2837 SW 25 ST
City-St-Zip: MIAMI, FL 33133

Title: TD () Delete
Name: VERA DE CONSUEGRA, XIOMARA
Address: 2837 SW 25 ST
City-St-Zip: MIAMI, FL 33133

Title: SD () Delete
Name: GONZALEZ, ORLANDO P
Address: 2837 SW 25 ST
City-St-Zip: MIAMI, FL 33133

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:

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: MANUEL CONSUEGRA

PD

04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date