2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 16, 2004 8:00 am Secretary of State 04-16-2004 90072 029 ***150.00 **DOCUMENT # P93000028705** 1. Entity Name FEDMA, INC. Principal Place of Business Mailing Address 2051 SW 126TH COURT 7310 NW 41 STREET MIAMI, FL 33166 US MIAMI, FL 33175 US CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0403239 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MOYA, EDDY DO NOT WRITE 149982 SW 69TH STREET MIAMI, FL 33193 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. . Signature, typed werinted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE NAME FERNANDEZ, FELIPE 2051 SW 126 CT STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33175 VSD TITLE MOYA, EDDY NAME STREET ADDRESS 14982 SW 69 ST CITY-ST-ZIP MIAMI, FL 33193 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-71P 12. I hereby certify that the information supplied with this filing does not qualify 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 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 employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an activities, with all other like empowered.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

305-552-2960