2004 FOR PROFIT CORPORATION

Apr 30, 2004 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # P93000088754 04-30-2004 90288 016 ***150.00 AMPÚERO ENTERPRISES, INC. Principal Place of Business Mailing Address 9688 S.W. 24 ST. 9688 SW 24TH ST ATTN: R. VALDES' ATTN: R. VALDES MIAMI, FL 33165 US MIAMI, FL 33165 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03312004 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For 65-0465362 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MAROUEZ Law Offices of MARGUEZ, JOSE M Street Address (P.O. Box Namber is Not A September), P.A. 782 NW LEJUENE RD **SUITE 548** LeJeune Center, Suite 548 MIAMI, FL 33126 782 N.W. LeJeune Road City Zip Code Miami, Florida 33126 8. The above named/entity submit his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. J am familiar with, and accept the obligations of registered age SIGNATURE. ed of printed name of registered agent and ti (NOTE: Registered Agent signature required when reinstating) if applicat 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE Change Addition TITLE VALDES, DANIEL R NAME NAME 9755 S.W. 62ND ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33173 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME HERRAN, MANUEL A NAME 8460 SW 5TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE HERRAN, JOSE A NAME NAME STREET ADDRESS 8455 GRAND CANAL DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MIAMI, FL 33144 Delete TITLE Change Addition TITLE GUERRA, JORGE NAME NAME 8440 S.W. 58 STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL CITY-ST-ZIP TITLE Addition | TITLE Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information susplied 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 susplemental veport 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 province or trustee empowered 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 address, with all other like empowered.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

FURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Change

Addition

FILED