## 2004

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2004 FOR PROFIT CORPORATION ANNUAL REPORT		Jun 18, 2004 8:00 an Secretary of State
DOCUMENT # P9400004352		06-18-2004 90004 015 ***158 75

1. Entity Name ZAMORANO ENTERPRISES, INC. Principal Place of Business Mailing Address 54058037 120 N.W. 30TH ST. 120 N.W. 30TH ST. MIAMI, FL 33127 MIAMI, FL 33127 2. Principal Place of Business 3. Mailing Address 2322 N.W. 7 Court 2322 N.W. 7 COURT Suite, Apt. #, etc. Suite, Apt. #, etc. 06162004 CR2E034 (10/03) Chq-P City & State City & State Miami, FL 4. FEI Number Applied For FL Miami 65-0460179 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired U.S. A. U.S.A. Fee Required =7.=Name and Address of New Registered Agent → G.-Name and Address of Current Registered Agent ORTEGA, MANUEL: Street Address (P.O. Box Number is Not Acceptable) 120 N.W. 30TH ST. MIAMI, FL 33127 1249 S.N. 17 Terrace City Miami 8. 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 or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 8, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PD ☐ Addition Change TITLE : ☐ Delete TITLE ORTEGA, MANUEL ortega, Manuel NAME NAME 1249 S.W. 17 Terrace STREET ADDRESS 120 N.W. 30TH ST. STREET ADDRESS MIAMI, FL 33127-Miami, FL 33145 CITY-ST-ZIP CITY-ST-ZIP VPD TITLE VPD ☐ Delete TITLE Change ☐ Addition ortega, Martha ORTEGA, MARTHA NAME NAME 1249 S.W. 17 Terrace 120 N.W. 30TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI..FL CITY-ST-ZIP Miami, FL 33145 ☐ Addition TITLE Delete\_ TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-7/8 CITY-ST-ZIP Addition TITLE ☐ Defete THILE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 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.

SIGNATURE:

6-16-04 (305) 571-9413

Helachnen

#19400004352

June 16, 2004

**Division of Corporations** P.O. BOX 1500 Tallahassee, FL 32302-1500

Zamorano Enterprises, Inc.

FEIN: 65-0460179

Form: 2004 UBR

To Whom It May Concern:

Enclosed we are returning the 2004 Uniform Business Report with the original check, which was sent back due to the missing report.

Furthermore, note that there has been an address change and therefore it took longer to forward the mail to our new correct address. Please waive the \$400.00 late fee, due the delay we had by the postal service process.

If you have any further questions, please do not hesitate to contact me.

Thanking you for your attention to this matter, I remain,

Vice-President