2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 13, 2005 08:00 AM Secretary of State DOCUMENT # P94000025625 1. Entity Name ROSA M. VEGA & ASSOCIATES, P.A. Principal Place of Business Mailing Address 8500 W FLAGLER ST 8500 W FLAGLER ST SUITE 204-B SUITE 204-B MIAMI, FL 33144 US MIAMI, FL 33144 01042005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FE! Number Applied For 65-0490524 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VEGA, ROSA M DO NOT WRITE 8500 W FLAGLER ST SUITE 204-B IN THIS SPACE MIAMI, FL 33144 8. The above name of roose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of SIGNATURE Signature, typed or printed name of regi (NOTE Registered Agent signature required when reinstating) 000000180201 01713705-80047-018 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. \Box Added to Fees 10. OFFICERS AND DIRECTORS TITLE VEGA, ROSA M NAME STREET ADDRESS 8500 W FLAGLER ST #204-B CITY-ST-ZIP MIAMI, FL TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with thindicated on this report or supplemental report is true of the corporation or the receiver or trustee empower. es not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information by rate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director due the properties as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachme

SIGNATURE:

NAME STREET ADDRESS CITY-ST-7IP

Daytime Phone #