2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000040665

Entity Name: PALMA BRAVA INC

FILED Mar 03, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6601 LYONS ROAD UNIT I-1 COCONUT CREEK, FL 33073 **Current Mailing Address: New Mailing Address:** 6601 LYONS ROAD UNIT I-1 COCONUT CREEK, FL 33073 US FEI Number: 65-0614000 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEE, WINSTON 6601 LYONS ROAD UNIT I-1 US COCONUT CREEK, FL 33073 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: CFO (X) Change () Addition LEE, WINSTON Name: Name: LEE, WINSTON 6295 N.W. 104TH WAY 6295 N.W. 104TH WAY Address: Address: City-St-Zip: PARKLAND, FL City-St-Zip: PARKLAND, FL 33076 Title: Title: (X) Delete () Change () Addition Name: LEE. ROXAN Name: 25 FELTHAM RD. Address: Address: MARKHAM, ONTARIO, CN City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition LEE, HUBERT Name: Name: 691 DENISON STREET Address: Address: SCARBOROUGH, ONTARIO, CN City-St-Zip: City-St-Zip: Title: PS (X) Delete Title: () Change () Addition LEE, MILA NABOR Name: Name: Address: 50 SKYVIEW CRESCENT Address: City-St-Zip: DOWN MILLS ONTARIO, CANADA, MJ21B8 City-St-Zip: Title: Title: (X) Delete () Change () Addition Name: LEE, JAMES Name: 50 SKYVIEW CRESCENT Address: Address: City-St-Zip: DOWN MILLS ONTARIO, CANADA, MJ21B8 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: WINSTON J LEE CEO 03/03/2004