


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 21, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P94000040691**

1. Entity Name  
**LEPANTO INVESTMENTS INC.**



Principal Place of Business      Mailing Address

**7801 NW 37TH STREET**      **7801 NW 37TH ST**  
**MIAMI, FL 33166-6559 US**      **MIAMI, FL 33166-6559 US**

**DO NOT WRITE IN THIS SPACE**



01212005    No Chg-P    CR2E034 (10/03)

4. FEI Number <b>65-0507693</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**BEFELER, GEORGE**  
**150 W. FLAGLER ST.**  
**MUSEUM TOWER, SUITE 2701**  
**MIAMI, FL 33130**

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing)      DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U000000272339 03/21/05-80085-017 158.75
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUZMAN, HECTOR J 7801 NW 37TH STREET MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BASAGOITIA, JAIME 7801 NW 37TH ST MIAMI, FL 33166
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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:**       **8/01/2005**      **305 582-2639 x 1229**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #