

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90665 020 \*\*\*150.00

<b>DOCUMENT # P95000006453</b> 1. Entity Name <b>EL COMERCIO PUBLISHING CORP.</b>					
Principal Place of Business <b>7270 NW 12ST ST</b> <b>554</b> <b>MIAMI, FL 33126 US</b>			Mailing Address <b>7270 NW 12ST</b> <b>554</b> <b>MIAMI, FL 33126 US</b>		
2. Principal Place of Business <b>5201 Lagoon Drive</b> Suite, Apt. #, etc. <b>PH972</b>			3. Mailing Address <b>5201 Blue Lagoon Drive</b> Suite, Apt. #, etc. <b>PH972</b>		
City & State <b>MIAMI</b>		City & State <b>MIAMI</b>		4. FEI Number <b>65-0563625</b>	
Zip <b>33126</b>		Country <b>33126</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent <b>DE ACQUAVIVA, GUADALUPE M</b> <b>7270 NW 12TH ST</b> <b>554</b> <b>MIAMI, FL 33126</b>				7. Name and Address of New Registered Agent Name <b>ACQUAVIVA, Guadalupe M.</b> Street Address (P.O. Box Number is Not Acceptable) <b>5201 Lagoon Drive PH972</b> City <b>MIAMI</b>	
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 reinstating)					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 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		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE <b>MD</b> <input type="checkbox"/> Delete NAME <b>DE MANTILLA, MORENA</b> STREET ADDRESS <b>7270 NW 12 ST STE 554</b> CITY-ST-ZIP <b>MIAMI, FL 33126</b>			TITLE <b>Director</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME <b>MORENA MANTILLA</b> STREET ADDRESS <b>5201 Blue Lagoon Drive PH972</b> CITY-ST-ZIP <b>MIAMI FL 33126</b>		
TITLE <b>TSVD</b> <input type="checkbox"/> Delete NAME <b>DE ACQUAVIVA, GUADALUPE M</b> STREET ADDRESS <b>7270 NW 12 ST STE 554</b> CITY-ST-ZIP <b>MIAMI, FL 33126</b>			TITLE <b>President, T, S, V, D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME <b>Guadalupe M. Acquaviva</b> STREET ADDRESS <b>5201 Blue Lagoon Drive PH972</b> CITY-ST-ZIP <b>MIAMI FL 33126</b>		
TITLE <b>DV</b> <input type="checkbox"/> Delete NAME <b>ACQUAVIVA, JORGE F</b> <i>Same</i> STREET ADDRESS <b>7270 NW 12TH ST, STE 554</b> <i>Change of address only</i> CITY-ST-ZIP <b>MIAMI, FL 33126</b>			TITLE <b>MD</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME <b>5201 Blue Lagoon Drive PH972</b> CITY-ST-ZIP <b>MIAMI, FL 33126</b>		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS 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: <u><i>P. M. de Acquaviva</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					