


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000019396 1. Entity Name ALAYON & ASSOCIATES, P.A.	
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FILED
 04 APR 26 AM 10:03
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business 2450 SW 137 AVE. STE 221 MIAMI, FL 33175 US	Mailing Address 2450 SW 137 AVE. STE 221 MIAMI, FL 33175 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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04072004 Chg-P CR2E034 (10/03)

City & State Zip Country	City & State Zip Country
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4. FEI Number 65-0560962	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

~~A&P REGISTERED AGENT, INC.~~
 2450 SW 137TH AVE.
 STE 221
 MIAMI, FL 33175

7. Name and Address of New Registered Agent

Name: A & A Registered Agent, Inc.
 Street Address (P.O. Box Number is Not Acceptable):
 City: FL Zip Code:

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: Gretel Rodriguez, President DATE: 4/7/04

Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD <u>S</u>	<input type="checkbox"/> Delete
NAME	ALAYON, RICHARD A ESQ.	
STREET ADDRESS	2450 SW 137TH AVE., STE 221	
CITY-ST-ZIP	MIAMI, FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	LEON, IVETTE HALPHEN ESQ.	
STREET ADDRESS	2450 SW 137TH AVE., STE 221	
CITY-ST-ZIP	MIAMI, FL 33175	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALAYON, RICHARD A, ESQ.	
STREET ADDRESS	2450 SW 137 Avenue, suite 221	
CITY-ST-ZIP	MIAMI, FLORIDA 33175	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> 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: Richard A. Alayon DATE: 4/21/04 (305) 221-2110

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