

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000066366

FILED
Aug 03, 2005
Secretary of State**Entity Name:** RURAL INTERNATIONAL, INC.**Current Principal Place of Business:**200 S BISCAYNE BLVD.
3550
MIAMI, FL 33131**New Principal Place of Business:**2525 PONCE DE LEON BOULEVARD
400
CORAL GABLES, FL 33134**Current Mailing Address:**200 S BISCAYNE BLVD.
3550
MIAMI, FL 33131**New Mailing Address:**2525 PONCE DE LEON BOULEVARD
400, ATTN: ROBERT B. MACAULAY
CORAL GABLES, FL 33134**FEI Number:** 65-0603095**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MACAULAY, ROBERT B
2525 PONCE DE LEON BLVD STE 400
MIAMI, FL 33134 US**Name and Address of New Registered Agent:**MACAULAY, ROBERT B
2525 PONCE DE LEON BLVD
400
CORAL GABLES, FL 33134 US

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:

08/03/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TOLEDO, FERNANDO
Address: 200 S BISCAYNE BLVD 3550
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: RABELLO, KATIA
Address: 200 S BISCAYNE BLVD 3550
City-St-Zip: MIAMI, FL 33131

Title: S () Delete
Name: BINDER, LUISA
Address: 200 S. BISCAYNE BLVD #3550
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change () Addition
Name: RABELLO, KATIA
Address: 2525 PONCE DE LEON BOULEVARD, #400
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: RABELLO, KATIA
Address: 2525 PONCE DE LEON BOULEVARD, #400
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: SALGADO, JOSE ROBERTO
Address: 2525 PONCE DE LEON BOULEVARD, #400
City-St-Zip: CORAL GABLES, FL 33134

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: KATIA RABELLO

P

08/03/2005

Electronic Signature of Signing Officer or Director

Date