2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 30, 2004 8:00 am Secretary of State

DOCUMENT # P960 1. Entity Name VILLANOVA HOLDINGS, INC.			04-30-2004 90216 013 ***150.00		
Principal Place of Business 601 BRICKELL KEY DRIVE SUITE 805 MIAMI, FL 33131	Mailing Address 601 BRICKELL KEY SUITE 805 MIAMI, FL 33131		94073763		
2. Principal Place of Business	3. Mailing Address]		
Suite, Apt. #, etc. 1441 BRICKEL AVE. SI	Suite, Apt. #, etc.	ELL ANE SUITE 1014	03302004 Chg-P CR2E034 (10/d	03)	
City & State	City & State MIA ni , Fi		4. FEI Number 65-0670506	Applied For Not Applicable	
Zip Country	Zip	Country	5 Certificate of Status Desired S8.75	Additional	
33131 U. S	of Current Registered Agent	<u> </u>	7. Name and Address of New Registered Agent	uired	
ALLEN & GALEGO 601 BRICKELL KEY DRIVE SUTIE 805 MIAMI, FL 33131 8. The above named entity submits this the obligations of registered agent. SIGNATURE Signature, typed or printed name of the submit submi	state the purpose of changing the state of the purpose of changing the state of the	Street Address of 1441 Brands of 144	Street Address (P.O. Box Number is Not Acceptable) 1441 BRICKELL AVE: SUITE 1014		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
TITLE PSD	ICERS AND DIRECTORS Delete	TITLE PSD			
STREET ADDRESS 501 BRICKELL KEY DR STE 805		STREET ADDRESS 144	INOVICH, EDUARDO I BRICKELL AVE. SUITE 1014 INI FL		
TITLE SS NAME ALLEN, ROBERT N JF STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131		TITLE NAME STREET ADDRESS OUT ST. 71B	W. ROBERT N. JR. BRICKELL AVE ITE 1014, MIAMI FL, 33131	nge Addition	
TITLE NAME	☐ Delete	TITLE NAME	□ Char	nge	

ALLE NAME STREET ADDRESS 601 B CITY-ST-ZIP MIAM TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information surplied 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 to a additional 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 trusted 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 a statutes, with all other like empowered.

SIGNATURE:

<u>305 .372 .5300</u>