

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000018670

FILED
Apr 28, 2004
Secretary of State

Entity Name: WARRI INTERNATIONAL INC.

Current Principal Place of Business:

5299 N.W. 192ND LANE
MIAMI, FL 33055

New Principal Place of Business:

Current Mailing Address:

PO BOX 140668
CORAL GABLES, FL 33114

New Mailing Address:

FEI Number: 30-0079172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, SONYA
5299 N.W. 192ND LANE
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DIXON, SONYA
Address: 5299 N.W. 192ND LANE
City-St-Zip: MIAMI, FL 33055

Title: VP (X) Delete
Name: LEWIS, DIXON D
Address: 5299 N.W. 192ND LANE
City-St-Zip: MIAMI, FL 33055

Title: S () Delete
Name: FRANCIS, NATASHA
Address: 5299 N.W. 192ND LANE
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SONIA DIXON

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date