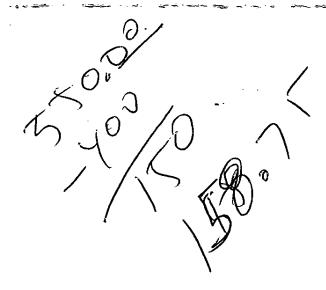
2004 FOR PROFIT CORPORATION & ANNUAL REPORT

FILED **DOCUMENT # P96000020326** 04 OCT 15 Mill: 50 % 1. Entity Name JORGE L. ALFONSO PA Principal Place of Business Mailing Address 8821 SW 105 STREET 8821 SW 105 STREET MIAMI, FL 33176 MIAMI, FL 33176 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08192004 CR2E034 (10/03) Cha-P City & State City & State 4. FEI Number Applied For 65-0641737 Not Applicable _Country -Country \$8.75 Additional Zip _____ 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ALFONSO, JORGE Street Address (P.O. Box Number is Not Acceptable) 8821 SW 105 STREET MIAMI, FL 33176 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Due by September 8, 2004 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D ☐ Change Addition TITLE ☐ Delete TITLE ALFONSO, JORGE L NAME NAME STREET ADDRESS 8821 SW 105 STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33176 CITY-ST-ZIP Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Addition **60004244** /03/04--01048--0 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 reserver 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 attacpment with an address, with all other like empowered. SIGNAT MEAND TYPED OR PHINTE SIGNATURE: FFICER OR DIRECTOR_

****IMPORTANT NOTICE****

You are eligible for a waiver of the \$400 late fee if you did not receive notice of this annual report being due by May 1, pursuant to 607.193(1)(b), Florida Statutes.

A letter stating this fact must accompany the annual report when it is submitted for filing.



P96000020326 JORGE L. ALFONSO PA 8821 SW 105 STREET MIAMI FL 33176

Please wave the 400. Late fee since notice of the annual report was not becomed hyme.

Hanryout Jorge Alfonso.