2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000024111

Entity Name: CENTRAL JOSEFITA, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2665 SOUTH BAYSHORE DR. STE. 200 MIAMI, FL 33133 US				2665 SOUTH BAYSHORE DR. SUITE 701 MIAMI, FL 33133 US		
Current Mailing Address:				New Mailing Address:		
Current Manning Address.				New Maining Address.		
STE. 200	665 SOUTH BAYSHORE DR. TE. 200 IAMI, FL 33133 US			2665 SOUTH BAYSHORE DR. SUITE 701 MIAMI, FL 33133 US		
FEI Number:	65-0672612	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
GUTIERREZ, JR, NICOLAS J ESQ 2665 SOUTH BAYSHORE DR, GRAND BAY PLAZA, SUITE 200 MIAMI, FL 33133 US				GUTIERREZ, JR, NICOLAS J ESQ 2665 SOUTH BAYSHORE DR, GRAND BAY PLAZA, SUITE 701 MIAMI, FL 33133 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:				04/29/2005		
	Electronic	Signature of Registered Ager	nt			Date
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () E MARTINEZ, ADA 10023 SW 79TH MIAMI, FL 33156			Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	D ()E PENICHET, HILD 15374 SW 113 T MIAMI, FL 33178	ERR		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	VD () E SANTOS, ALBER 2914 BROWNWE SULLIVANS ISLA	ELL ST.		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:		CHOLAS J JR.,ESQ YSHORE DR., STE. 200		Title: Name: Address: City-St-Zip:	GUTIERREZ, NI	Change () Addition ICHOLAS J JR.,ESQ AYSHORE DR., STE. 701 33
Title: Name: Address: City-St-Zip:	PD ()E MARTINEZ DE SA 10023 SW 79TH MIAMI, FL 33156	CT.		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	. ,			Title: Name: Address: City-St-Zip:	()	Change () Addition

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: NICOLAS J. GUTIERREZ, JR., ESQ. S 04/29/2005