2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000030802

Entity Name: PELAEZ INVESTMENT CORP.

FILED Feb 19, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17560 ATLANTIC BLVD 4747 COLLINS AVE.

APT 518 APT 806

SUNNY ISLES BCH, FL 33160 MIAMI BEACH,, FL 33140

Current Mailing Address: New Mailing Address:

17560 ATLANTIC BLVD 4747 COLLINS AVE.

#518 #806 SUNNY ISLAND BEACH, FL 33160 #806 MIAMI BEACH, FL 33140

FEI Number: 65-0663806 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PELAEZ, MARIA A
17560 ATLANTIC BLVD APT 518
PELAEZ, MARIA A
4747 COLLINS AVE.

SUNNY ISLES BCH, FL 33160 US #806

MIAMI BEACH, FL 33140 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: MARIA A. PELAEZ 02/19/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition

Name:PELAEZ, RAFAELName:PELAEZ, RAFAELAddress:1363 BIARRITZ DRIVEAddress:4747 COLLINS AVE. APT. # 806

City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33140

Title: VSD () Delete Title: VSD (X) Change () Addition

Name: PELAEZ, MARIA A Name: PELAEZ, MARIA A

Address: 1363 BIARRITZ DRIVE Address: 4747 COLLINS AVE. APT. # 806 City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33140

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: MARIA A. PELAEZ VSD 02/19/2005