

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000074031

FILED
Jan 20, 2004
Secretary of State

Entity Name: SOMOZA-STEVENSON ENTERPRISES, INC.

Current Principal Place of Business:

1850 US HWY ONE
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

9400 SW 103RD STREET
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0715095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOMOZA, MYRNA
9400 SW 103 STREET
MIAMI, FL 33176 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: PS () Delete
Name: SOMOZA, MYRNA
Address: 9400 SW 103RD STREET
City-St-Zip: MIAMI, FL 33274

Title: VP () Delete
Name: SOMOZA, JULIO
Address: 9400 SW 103RD STREET
City-St-Zip: MIAMI, FL 33274

Title: D (X) Delete
Name: STEVENS, LINDA S
Address: 1901 BAY ROAD #201
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: SOMOZA, MYRNA
Address: 9400 SW 103RD STREET
City-St-Zip: MIAMI, FL 33176

Title: SEC (X) Change () Addition
Name: STEVENS, LINDA S
Address: 471 18TH STREET
City-St-Zip: VERO BEACH, FL 32960

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: MYRNA SOMOZA

PS

01/20/2004

Electronic Signature of Signing Officer or Director

_____ Date