

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000081215

FILED
Mar 15, 2004
Secretary of State

Entity Name: JULDANICO PROPLETE', INC.

Current Principal Place of Business:

4630 N. UNIVERSITY DRIVE
STE. 3400
CORAL SPRINGS, FL 33067

New Principal Place of Business:

4630 N. UNIVERSITY DRIVE
STE. 3400
CORAL SPRINGS, FL 33067 US

Current Mailing Address:

4630 N. UNIVERSITY DRIVE
STE. 3400
CORAL SPRINGS, FL 33067

New Mailing Address:

FEI Number: 65-0725321 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANDIN-NELSON, ANAMARIA
5565 E. LEITNER DRIVE
CORAL SPRINGS, FL 33067 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: NELSON, JOSEPH J
Address: 5565 LEITNER DRIVE EAST
City-St-Zip: CORAL SPRINGS, FL 33067

Title: VD () Delete
Name: EL MASRY, NAZIE
Address: SLOTERWEG 327, 1171 VC, BADHOE VEDORP
City-St-Zip: THE NETHERLANDS,

Title: SD () Delete
Name: EL MASRY, PATRICIA
Address: SLOTERWEG 327, 1171 VC, BADHOE VEDORP
City-St-Zip: THE NETHERLANDS,

Title: TD () Delete
Name: BANDIN-NELSON, ANAMARIA
Address: 5565 LEINTER DRIVE EAST
City-St-Zip: CORAL SPRINGS, FL 33067

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:

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: JOSEPH J. NELSON

PD

03/15/2004

Electronic Signature of Signing Officer or Director

_____ Date