2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

FILED May 02, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # P9700003694	0		Secretary of State
Principal Plac 848 BRICKE SUITE 1010 MIAMI, FL 3	LL AVENUE	aiting Address 48 BRICKELL AVENUE UITE 1010 IIAMI, FL 33131		
	OO NOT WRITE II		CE	01132005 No Chg-P CR2E034 (10/03) 4. FEI Number
OJEDA, ALAN 848 BRICKELL AVENUE SUITE 1010 MIAMI, FL 33131				DO NOT WRITE IN THIS SPACE
	named entity submits this statement for the prions of registered agent. Signature, typed or printed name of registered agent and title			gistered agent, or both, in the State of Florida. I am familiar with, and accept equired when reinstating) DATE
	E NOW!!! FEE I\$ \$150.00 ay 1, 2005 Fee will be \$550.00	 Election Campaign Final Trust Fund Contribution. 		\$5.00 May Be Added to Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DIEDA, ALAN 848 BRICKELL AVE, STE 1010 MIAMI, FL 33131	TORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-	<u>U00000</u> 355880 05/04/05-80050-024 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-SY-ZIP				IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby of indicated of the cor	ertify that the information supplied with this fill on this report or supplemental report is true a poration or the receiver or trus ee empowered	ing does not qualify for the exe nd accurate and that my signal to execute this report as requi	mption stated in ture shall have the red by Chapter 6	In Section 119.07(3)(f), Florida Statutes. I further certify that the information the same legal effect as if made under oath, that I am an officer or director 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if