

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000044918

FILED
Apr 20, 2004
Secretary of State

Entity Name: BAEZ INVESTMENTS GROUP, INC.

Current Principal Place of Business:

435 SW 84 AVE
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

435 SW 84 AVE
MIAMI, FL 33144

New Mailing Address:

FEI Number: 65-0756987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAEZ, OLGA
435 SW 84 AVE
MIAMI, FL 33144

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: BAEZ, JESUS E
Address: 435 SW 84 AVE
City-St-Zip: MIAMI, FL 33144

Title: V () Delete
Name: BAEZ, OLGA
Address: 435 SW 84 AVE
City-St-Zip: MIAMI, FL 33144

Title: S () Delete
Name: BAEZ, OSVALDO J
Address: 7895 SW 28 ST
City-St-Zip: MIAMI, FL 33155

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:

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: OLGA BAEZ

VP

04/20/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date