2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2005 08:00 AM **DOCUMENT # P97000078380** Secretary of State 1. Entity Name MEGAN FINANCE CORP. Principal Place of Business Mailing Address 2276 N.W. 21ST TERRACE 2276 N.W. 21ST TERRACE MIAMI, FL 33142 MIAMI, FL 33142 01122005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0780951 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MUNIZ, JULIO D DO NOT WRITE 2276 N.W. 21ST TERRACE MIAMI, FL 33142 IN THIS SPACE 3. 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. I am famillar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and little if emplicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS MÆ NAME MUNIZ, JULIO D 2276 N.W. 21ST TERRACE STROET ADDRESS U00000323178 CITY-ST-ZIP MIAMI, FL 33142 04/22/05-80042-021 150.00 SVTD TITLE NAME WHITAKER, MARILYN STREET ADDRESS **2276 N.W. 21ST TERRACE** CITY-ST-ZIP MIAMI, FL 33142 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY -ST - ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP TITLE NAME STREET AUDRESS CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE