## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 26, 2004 8:00 am Secretary of State DOCUMENT # P98000014591 04-26-2004 90518 024 \*\*\*150.00 CADENAS ACCOUNTING, INC. Principal Place of Business Mailing Address 54040691 4236 W. 16 AVE 4236 W. 16 AVE HIALEAH, FL 33012 HIALEAH, FL 33012 CR2E034 (10/03) No Cha-P 02292004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0814082 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CADENAS, ARAMIS R DO NOT WRITE 1161 WEST 42ND ST HIALEAH, FL 33010 IN THIS SPACE 8. 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 familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent site, ture required when reinstating) 9. Election Campaign Financin \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. 'riner' to Fees 10. **PVST** TITLE NAME CADENAS, ARAMIS R 1161 WEST 42ND ST STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33010 TITLE NAME CADENAS, ARAMIS R STREET ADDRESS 1161 WEST 42ND ST HIALEAH, FL 33010 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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 frue and accurate and that my signature shall have the same legal effect as if made under eath; 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.

SIGNATURE:

PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

FILED