

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000015982

Entity Name: FLOMAR INVESTORS, INC.

FILED  
May 02, 2005  
Secretary of State

## Current Principal Place of Business:

706 N.W. 87TH AVENUE  
#410  
MIAMI, FL 33172

## New Principal Place of Business:

302 STORTER AVE/ PO BOX 453  
EVERGLADES CITY, FL 341390453 US

## Current Mailing Address:

706 N.W. 87TH AVENUE  
#410  
MIAMI, FL 33172

## New Mailing Address:

302 STORTER AVE/PO BOX 453  
EVERGLADES CITY, FL 341390453 US

FEI Number: 65-0815602

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JIMENEZ, JUAN A  
706 N.W. 87TH AVENUE  
#410  
MIAMI, FL 33172 US

## Name and Address of New Registered Agent:

JIMENEZ, JUAN A  
302 STORTER AVE/PO BOX 453  
EVERGLADES CITY, FL 341390453 US

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: JUAN A. JIMNEZ

05/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: JIMENEZ, JUAN A  
Address: 706 NW 87TH AVENUE, #410  
City-St-Zip: MIAMI, FL 33172

Title: PSD ( ) Delete  
Name: MAINEGRA, ANA MARIA  
Address: 706 NW 87TH AVENUE, #410  
City-St-Zip: MIAMI, FL 33172

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: JIMENEZ, JUAN A  
Address: 302 STORTER AVE/PO BOX 453  
City-St-Zip: EVERGLADES CITY, FL 341390453 US

Title: VSD (X) Change ( ) Addition  
Name: MAINEGRA, ANA MARIA  
Address: 302 STORTER AVE/PO BOX 453  
City-St-Zip: EVERGLADES CITY, FL 341390453 US

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: ANAMARIA MAINEGRA

VTD

05/02/2005

Electronic Signature of Signing Officer or Director

Date