## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000025808

Entity Name: TREE VENTURES INC.

FILED Apr 18, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

21801 SW 202 AVE 16901 SW 204 STREET MIAMI, FL 33170 MIAMI, FL 33187

Current Mailing Address: New Mailing Address:

21801 SW 202 AVE P.O. BOX 924864 MIAMI, FL 33170 PRINCETON, FL 33092

FEI Number: 65-0820621 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CEQUERELLA, RAFAEL E
21801 SW 202 AVE
MIAMI, FL 33170 US

CEQUERELLA, RAFAEL E
16901 SW 204 STREET
MIAMI, FL 33187 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: 04/18/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 PD
 ( ) Delete

 Name:
 CEQUERELLA, RAFAEL E

 Address:
 21801 SW 202 AVE

 City-St-Zip:
 MIAMI, FL 33170

 Title:
 ST ( ) Delete

 Name:
 CEQUERELLA, MARIA

 Address:
 21801 SW 202 AVE

 City-St-Zip:
 MIAMI, FL 33170

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 (X) Change ( ) Addition

 Name:
 CEQUERELLA, RAFAEL E

 Address:
 16901 SW 204 STREET

 City-St-Zip:
 MIAMI, FL 33187

Title: ST (X) Change ( ) Addition

Name: CEQUERELLA, MARIA Address: 16901 SW 204 STREET City-St-Zip: MIAMI, FL 33187

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: RAFAEL E. CEQUERELLA PD 04/18/2005