

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000034041

Entity Name: VARI INTERNATIONAL, INC

FILED  
Apr 28, 2004  
Secretary of State

## Current Principal Place of Business:

80 SW 8TH STREET  
SUITE 2000  
MIAMI, FL 33130

## Current Mailing Address:

80 SW 8TH STREET  
SUITE 2000  
MIAMI, FL 33130

## New Principal Place of Business:

2000 PONCE DE LEON BLVD  
6TH FLOOR  
CORAL GABLES, FL 33134

## New Mailing Address:

2000 PONCE DE LEON BLVD  
6TH FLOOR  
CORAL GABLES, FL 33134

FEI Number: 65-0832231

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VALDES, DAGOBERTO  
8404 SW 40 STREET  
MIAMI, FL 33155 US

## 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: VILORIA, OMAR  
Address: 80 SW 8TH STREET, SUITE 2000  
City-St-Zip: MIAMI, FL 33130

Title: TD ( ) Delete  
Name: VILORIA, DUVIS  
Address: 80 SW 8TH STREET, SUITE 2000  
City-St-Zip: MIAMI, FL 33130

Title: VPD (X) Delete  
Name: VILORIA, ERICK  
Address: 80 SW 8TH STREET, SUITE 2000  
City-St-Zip: MIAMI, FL 33130

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: VILORIA, OMAR  
Address: 2000 PONCE DE LEON BLVD, 6TH FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

Title: TD (X) Change ( ) Addition  
Name: VILORIA, DUVIS  
Address: 2000 PONCE DE LEON BLVD, 6TH FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

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: OMAR VILORIA

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date