## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000046472

Entity Name: GRANADOS ENTERPRISES, INC.

FILED Jan 25, 2005 Secretary of State

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

6660 NORTH SEGOVIA CIRCLE 6651 HIDDEN COVE DR PEMBROKE PINES, FL 33331 DAVIE, FL 33314

Current Mailing Address: New Mailing Address:

6660 NORTH SEGOVIA CIRCLE 6651 HIDDEN COVE DR PEMBROKE PINES, FL 33331 DAVIE, FL 33314

FEI Number: 65-0838279 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:

GRANADOS, LUIS

6660 NORTH SEGOVIA CIRCLE
FORT LAUDERDALE, FL 33331 US

GRANADOS, LUIS
6651 HIDDEN COVE DR
DAVIE, FL 33314 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: 01/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition
Name: GRANADOS, LUIS
Address: 6660 NORTH SEGOVIA CIRCLE
Address: 6661 HIDDEN COVE DR

 Address:
 6660 NORTH SEGOVIA CIRCLE
 Address:
 6651 HIDDEN COVE DR

 City-St-Zip:
 PEMBROKE PINES, FL 33331
 City-St-Zip:
 DAVIE, FL 33314

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SOLANO, MIREYA
 Name:
 SOLANO, MIREYA

 Address:
 6660 NORTH SEGOVIA CIRCLE
 Address:
 6651 HIDDEN COVE DR

 City-St-Zip:
 PEMBROKE PINES, FL 33331
 City-St-Zip:
 DAVIE, FL 33314

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: LUIS GRANADOS D 01/25/2005