2004 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT DOCUMENT # P98000077912

Principal Place of Business

All Table All Comments and the All Comments and the

9553 HARDING AVENUE

#310

SURFSIDE, FL 33154

Mailing Address

4338 SW 8TH STREET MIAMI, FL 33134

01072004

No Chg-P

CR2E034 (10/03)

FILED

Mar 17, 2004 8:00 am Secretary of State

03-17-2004 90002 012 ***150.00

4. FEI Number 65-0871210

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO-NOT-WRITE IN-THIS-SPACE

2875 N.E. AVENTUR	IAL, KERRY E 191 STREET, STE. 500 A, FL 33180 named entity submits this statement for the pions of registered agent.	ourpose of changing its register	DO NOT WRITE IN THIS SPACE office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
			Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Finar Trust Fund Contribution.			
10.	OFFICERS AND DIREC	CTORS			
NAME STREET ADDRESS CITY-ST-ZIP	PD PERAZZINI, GIULIANO 9528 BAY DRIVE SÜRFSIDE, FL 33154	¥ ,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MANDUCHI, AGOSTINO 9553 HARDING AVENUE SURFSIDE, FL 33154				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		DO NOT WR	ITE
TITLE NAME STREET ADDRESS, CITY-ST-ZIP		u bulan kan	e lagaratione () de	IN THIS SPA	CE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE					

12. I hereby certify that the information supplied with this illing 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 true and accurate and that my 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 in used 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 apprecia, with all purpler like empowered.

SIGNATURE

STREET ADDRESS CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #