2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000084845

Entity Name: RALPH AGUIRRE & ASSOCIATES, INC.

FILED Apr 29, 2005 Secretary of State

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

1601 N PALM AVE 3089 LAKEWOOD CIRCLE 309C WESTON, FL 33332

PEMROKE PINES, FL 33026

Current Mailing Address: New Mailing Address:

1601 N PALM AVE 3089 LAKEWOOD CIRCLE WESTON, FL 33332

PEMROKE PINES, FL 33026

FEI Number: 65-0873158 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:

AGUIRRE, RAFAEL

1601 N PALM AVE

309C

AGUIRRE, RAFAEL

3089 LAKEWOOD CIRCLE

WESTON, FL 33332 US

PEMROKE PINES, FL 33026 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: RAFAEL AGUIRRE 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 AGUIRRE, RAFAEL
 Name:
 AGUIRRE, RAFAEL

 Address:
 1601 N PALM AVE
 Address:
 3089 LAKEWOOD CIRCLE

 City-St-Zip:
 PEMROKE PINES, FL 33026
 City-St-Zip:
 WESTON, FL 33332

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 AGUIRRE P 04/29/2005