

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000091924

Entity Name: CHIQUILINAS, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

9340 FOUNTAINE BLEAU BLVD
STE 314
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

9340 FOUNTAINE BLEAU BLVD
STE 314
MIAMI, FL 33172 US

New Mailing Address:

FEI Number: 65-0873598 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELEAN, BENILDA
8760 SW 133 AVE RD
#319
MIAMI, FL 33183 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: PSTD () Delete
Name: MELEAN, BENILDA S
Address: 7436 SOUTHWEST 48TH STREET
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: MELEAN, BENILDA S
Address: 9340 FOUNTAIN BLEAU BLVD. STE .314
City-St-Zip: MIAMI, FL 33172

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: BENILDA MELEAN

PRES

04/25/2005

Electronic Signature of Signing Officer or Director

Date