

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000096786

FILED
Apr 20, 2005
Secretary of State

Entity Name: RAFAEL LAPLANA INVESTMENTS, INC.

Current Principal Place of Business:

915 MIDDLE RIVER DR. STE. 506
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

915 MIDDLE RIVER DR. STE. 506
MORAITIS, COFAR, KARNEY & MORAITIS
FORT LAUDERDALE, FL 33304

Current Mailing Address:

915 MIDDLE RIVER DR. STE. 506
FORT LAUDERDALE, FL 33304

New Mailing Address:

915 MIDDLE RIVER DR. STE. 506
MORAITIS, COFAR, KARNEY & MORAITIS
FORT LAUDERDALE, FL 33304

FEI Number: 65-0899039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORAITIS, GEORGE R
915 MIDDLE RIVER DR. STE. 506
FORT LAUDERDALE, FL 33304 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: PTD () Delete
Name: LAPLANA, RAFAEL
Address: POLICLINIA AMERICANA AV. VENEZUELA PISO 2
City-St-Zip: CARACAS 1060 VENEZUELA,

Title: VPSD () Delete
Name: VILLAPALOS, MARIA E
Address: POLICLINIA AMERICANA AV. VENEZUELA PISO 2
City-St-Zip: CARACAS 1060 VENEZUELA,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVPS (X) Change () Addition
Name: LAPLANA, LUIS
Address: 2655 LEJUNE ROAD
City-St-Zip: CORAL GABLES, FL 33134

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 LAPLANA

D

04/20/2005

Electronic Signature of Signing Officer or Director

Date