## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000003476

City-St-Zip: MIAMI, FL 33146

Entity Name: CITY FINANCE OF MIAMI, CORP.

FILED Jan 12, 2004 Secretary of State

Elluty Na	ille: CITTEIN	ANCE OF MIAMI, CORP.			
Current P	rincipal Plac	e of Business:	New Principal Place o	f Business:	
901 PONCE DE LEON BOULEVARD SUITE 304 CORAL GABLES, FL 33134					
CORAL G.	ABLES, FL 33	3134			
Current IV	lailing Addre	ss:	New Mailing Address:		
SUITE 304	CE DE LEON E 1 ABLES, FL 33				
FEI Number	: 65-0920781	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address of	e and Address of New Registered Agent:	
901 PONC SUITE 304 CORAL G	ABLES, FL 33	3OULEVARD 3134	purpose of changing its registered	office or registered agent, or both,	
in the State	e of Florida.				
SIGNATUI	RE:				
	Electro	nic Signature of Registered A્	gent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( CASTRO, AMA 608 VALENCIA MIAMI, FL 33	AVE	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name:	SD ( SOLARANA, P		Title: ( Name: Address:	) Change ()Addition	

City-St-Zip:

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: SOLARANA PHILIP SD 01/12/2004