## 2004 FOR PROFIT CORPORATION: **ANNUAL REPORT**

May 10, 2004 08:00 AM Secretary of State DOCUMENT # P99000018591 1. Entity Name VISTA DEL RIO CORP. Principal Place of Business Mailing Address 4312 S.W. 8TH STREET 4312 S.W. 8TH STREET MIAMIL FL MIAMI, FL CR2E034 (10/03) 03242004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0901004 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MOLINA, GERMAN DO NOT WRITE 4312 S.W. 8TH STREET MIAMI, FL IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. required witen reinstating) Signature, typed or printed name of registered agent and title it applicable FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE MOLINA, GERMAN U00000158796 05/10/04-80003-023 150.00 NAME STREET ADDRESS **4312 S.W. 8TH STREET** CITY-ST-ZIP MIAMI, FL TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**