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

## FILED Apr 29, 2004 8:00 am Secretary of State 04-29-2004 90342 002 \*\*\*150.00

1. Entity Name	MENT # P9900002 CLOSET R US INC.	<b>3335</b>							
Principal Place of Business 9809 NW 80 AVENUE BAY 9-B HIALEAH, FL 33016		Mailing Address 9809 NW 80 AVENUE BAY 9-B HIALEAH, FL 33016			1 I <b>3 (</b> 4 <b>8 8</b> ) 1/2			B1185 11181 81181 81	1867 JI 1884
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03292004	Chg-P	CR2E	034 (10/03)	
City & State		City & State			4. FEI Numbe 65-0904			No	plied For t Applicable
Zip	Country	Zip	Country			of Status Desired		\$8.75 Add Fee Required	
	6. Name and Address of Currer	nt Registered Agent			7. Name and	Address of New	Registered	Agent	
ROJAS, ER 1501 WES	RNESTO A			Roja dress (F		r is Not Acceptal	ble)		
#11A HIALEAH,	FL 33012		1795	WQ.	st 41	st #	<del>/</del> 1-	E	
					eah		FL	Zip Code	°12_
	named entity submits this statement tions of registered agent.	for the purpose of changing its r	egistered office or	registere	ed agent, or both	h, iл the State of	Florida. I am	n familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:	Registered Agent signatur	re required	when reinstating)	3/2	2 9/04	/	<del></del>
<del></del>	<del></del>								
Áfter Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550		bution, 📮	<b>\$5.</b> Adde	00 May Be ad to Fees		·		
After Ma	ay 1, 2004 Fee will be \$550 OFFICERS AN	D.00 Trust Fund Contri ID DIRECTORS	bution,	<b>\$5.</b> Adde	ed to Fees	CHANGES TO O	FFICERS AN	<del></del>	
After Ma	officers an	7.00 Trust Fund Contri	11.	Adde	ADDITIONS/		FFICERS AN	ID DIRECTORS	S IN 11
After Ma  10.  TITLE  NAME	OFFICERS AN ROJAS, ERNESTO A	Trust Fund Contrib	11. TITLE NAME	P Ron o	ADDITIONS/	sto A.		Change	
After Ma	OFFICERS AN PROJAS, ERNESTO A 1501 WEST 41 STREET AAPT	Trust Fund Contrib	11. TITLE NAME STREET ADDRESS	P Roj o	ADDITIONS/	sto A.	ap+ #	Change	
10. TITLE NAME STREET ADDRESS	OFFICERS AN OFFICERS AN PROJAS, ERNESTO A 1501 WEST 41 STREET AAPT HIALEAH, FL 33012	Trust Fund Contrib	11. TITLE NAME STREET ADDRESS CITY-ST-2IP	PROJO 1775 Hia	ADDITIONS/ AS Erne - wast leah, F	sto A. 41 st a L. 3301	2pf #	Change	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN PROJAS, ERNESTO A 1501 WEST 41 STREET AAPT HIALEAH, FL 33012 VP PAJARES, PEDRO R	Trust Fund Contribition DIRECTORS  Delpte  Delpte	11. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	PROJO 1775 Hia	ADDITIONS/  ADDITIONS/  Twist  Leah, F	sto A. 41 st a L. 3301- edro R	2pf #	⊠ Change 1-€	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN P ROJAS, ERNESTO A 1501 WEST 41 STREET AAPT HIALEAH, FL 33012 VP PAJARES, PEDRO R 1355 WEST 53 STREET APT.	Trust Fund Contribition DIRECTORS  Delpte  Delpte	11. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	PROJO 1775 Hia VP Pajo 755	ADDITIONS/ AS E Me - wast leah, F wos, P	sto A. 41 st a L. 3301 edro R PL	2pf #= 2	⊠ Change 1-€	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN PROJAS, ERNESTO A 1501 WEST 41 STREET AAPT HIALEAH, FL 33012 VP PAJARES, PEDRO R	Trust Fund Contribition DIRECTORS  Delpte  Delpte	11. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	PROJO 1775 Hia VP Pajo 755	ADDITIONS/ AS E Me - wast leah, F wos, P	sto A. 41 st a L. 3301- edro R	2pf #= 2	⊠ Change 1-€	Addition
After Ma	OFFICERS AN P ROJAS, ERNESTO A 1501 WEST 41 STREET AAPT HIALEAH, FL 33012 VP PAJARES, PEDRO R 1355 WEST 53 STREET APT.	Trust Fund Control DIRECTORS Delete TT-A Delete #201	11. TITLE NAME STREET ADDRESS CITY- ST- 2IP TITLE NAME STREET ADDRESS CITY- ST- ZIP	PROJO 1775 Hia VP Pajo 755	ADDITIONS/ AS E Me - wast leah, F wos, P	sto A. 41 st a L. 3301 edro R PL	2pf #= 2	Change	Addition
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After Ma	OFFICERS AN P ROJAS, ERNESTO A 1501 WEST 41 STREET AAPT HIALEAH, FL 33012 VP PAJARES, PEDRO R 1355 WEST 53 STREET APT.	Trust Fund Control  Delpte  Delpte  Delpte  Delpte	TITLE NAME STREET ADDRESS CITY- ST- 2IP TITLE NAME STREET ADDRESS CITY- ST- ZIP	PROJO 1775 Hia VP Pajo 755	ADDITIONS/ AS E Me - wast leah, F wos, P	sto A. 41 st a L. 3301- edro R PL FL 330	2pf # 2	Change  Change  Change	Addition  Addition  Addition
After Ma  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE HAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	OFFICERS AN P ROJAS, ERNESTO A 1501 WEST 41 STREET AAPT HIALEAH, FL 33012 VP PAJARES, PEDRO R 1355 WEST 53 STREET APT.	Trust Fund Control  Delpte  Delpte  Delpte  Delpte	TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	PROJO 1775 Hia VP Pajo 755	ADDITIONS/ AS E Me - wast leah, F wos, P	sto A. 41 st a L. 3301- edro R PL FL 330	2pf # 2	Change  Change  Change	Addition  Addition  Addition

I nereby certify that the information supplied with this filing does not quality 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 📈	P.H . E	Ernesto 1	a. Rojas	President.	3/29/04	35-558-7	70
	URE AND TYPED OR PRINT	ED NAME OF SIGNING OF	FICER OR DIRECTOR		Date	Daytime Phone #	