2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000027357

Entity Name: MASARI INVESTMENTS CORPORATION

FILED Jan 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5050 SW 35 TERRACE 2219 HOLLYWOOD BLVD.

FORT LAUDERDALE, FL 33312 STE 105

HOLLYWOOD, FL 33020

Current Mailing Address: New Mailing Address:

5050 SW 35 TERRACE 2218 HOLLYWOOD BLVD

FORT LAUDERDALE, FL 33312 STE 105 HOLLYWOOD, FL 33020

FEI Number: 59-3566008 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SARAGA, MATEAS SARAGA, MATEAS

5050 SW 35 TERRACE 21205 YACHT CLUB DR FORT LAUDERDALE, FL 33312 US APT. 703

AVENTURA, FL 33180 US

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: MATEAS SARAGA 01/28/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 SARAGA, MATEAS
 Name:
 SARAGA, MATEAS

 Address:
 5050 SW 35 TERR
 Address:
 21205 YACHT CLUB DR #703

City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: AVENTURA, FL 33180

Title: VD () Delete Title: () Change () Addition
Name: SARAGA ARIF

 Name:
 SARAGA, ARIE
 Name:

 Address:
 5002 SW 35 TERR
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33312
 City-St-Zip:

Title: DTS () Delete Title: DTS (X) Change () Addition

 Name:
 SARAGA, MOISES
 Name:
 SARAGA, MOISES

 Address:
 5026 SW 35 TERR
 Address:
 3370 HIDDEN BAY DR #202

Address: 5026 SW 35 TERR Address: 3370 HIDDEN BAY DR #20 City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: AVENTURA, FL 33180

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: MATEAS SARAGA PD 01/28/2004