

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 12, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000037287**  
 1. Entity Name  
**MANHATTAN INTERNATIONAL MARKETPLACE CORPORATION**



Principal Place of Business  
**4711 NW 79TH STREET  
 SUITE 20T  
 MIAMI, FL 33166**

Mailing Address  
**4711 NW 79TH STREET  
 SUITE 20T  
 MIAMI, FL 33166**



03052004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0914336** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**MENESES, MAURICIO  
 4711 NW 79TH STREET  
 SUITE 20T  
 MIAMI, FL 33166**

**DO NOT WRITE 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

000000108600  
 04/12/04-80009-024 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MENESES, MAURICIO 4711 NW 79TH STREET SUITE 20 T MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD BRAS, JOAQUIM 4711 NW 79TH STREET SUITE 20 T MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MORRISON, BEATRIZ 4711 NW 79TH STREET SUITE 20 T MIAMI, FL 33166
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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: Mauricio Menezes **04/07/04** 305-640-1901  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #