2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 10, 2004 8:00 am Secretary of State

MAME SIREET ADDRESS CITY-ST-ZIP MICHELENA, PEDRO P MIAMI, FL 33125 TITLE ST MICHELENA, CONSUELO STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33125 TITLE MAME SIREET ADDRESS CITY-ST-ZIP MIAMI, FL 33125 TITLE MAME SIREET ADDRESS CITY-ST-ZIP TITLE MAME MAME SIREET ADDRESS CITY-ST-ZIP TITLE MAME SIREET ADDRESS SIREET ADDRESS CITY-ST-ZIP TITLE MAME SIREET ADDRESS SIREET ADDRESS CITY-ST-ZIP TITLE MAME SIREET ADDRESS SIREET ADDRESS SIREET ADDRESS CITY-ST-ZIP TITLE MAME SIREET ADDRESS SIREET	1. Entity Nam	e	# P99000041 GROUP, CORP.	120	6				05-10-20	004 90457		
Sultio, Apt. 4, etc. Sultio, Apt. 8, etc. Sultio, Apt. 8, etc. Pub. 4302004 ChgP CR2EG34 (10103)	141 N.W. 25	TH AVENUE	S	1-	41 N.W. 25TH AVENUI	E	l.		, 200	in yan kadan kada	** *	
City & State	2. Principal Pl	lace of Busir	ess	3.	Mailing Address							
Zip	Suite, Apt. #, etc.				Suite, Apt. #, etc.			04302004	Chg-P	CR2E03	14 (10/03)	
S. Certificate of Status Desired X Per Propleted Fee Propleted T. Name and Address of New Registered Agent T. Name and Address of New Registered Agent Name MICHELENA, PEDRO P 141 N.W. 25TH AVENUE MIAMI, F.L. 33125 City FL Zip Code 8. The abovia'n agreed, withity submits this statement for the purpose of changing its registered of those or registered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of legistered agent, or both, in the State of Rovida. I am familiar with, and accept the ooligination of Rovida agent and the familiar with accept the ooligination of Rovida agent and the familiar with accept the ooligination of Rovida agent and the familiar with accept the ooligination of Rovida agent and the familiar with accept the familiar wit	City & State						1			No	t Applicable	
MICHELENA, PEDRO P 141 N.W. 25TH AVENUE MIAMI, FL 33125 8. The aboved name agently submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Prorida. I am familiar with, and accept two obligations of large teared agent. SIGNATURE: SIGNATURE: SUBMET AVENUE SIRET AVENUE MICHELENA, PEDRO P 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. MILE MAME MICHELENA, PEDRO P 141 N.W. 25TH AVENUE MIAMI, FL 33125 MIA	Zip	÷ 6 Name	•			Cour	ntry			- A F	ee Required	
MICHELENA, PEDRO P	6. Name and Address of Current Registered Agent						Name	7. Name and	Address of New	Hegistered A	gent	
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 obligation of registered agent. SIGNATURE SURVIVE FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 After May 2, 2004 Fee will be \$550.00 Added to Fees will be \$5	141 N.W. 25TH AVENUE											
The colligations of the glastered agent. SIGNATURE FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be-\$550.00 OFFICERS AND DIRECTORS IT THE MICHELENA, PEDRO P STREET ADDRESS CITY-ST-ZIP MICHELENA, CONSULLO MICHELEN		f	· .		÷		City			FL	Zip Code	
After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE P PO MICHELENA, PEDRO P MICHELENA, PEDRO P STREET ADDRESS 141 N.W. 25TH AVENUE MIAMI, FL 33125 TITLE ST MICHELENA, CONSUELO MIAMI, FL 33125 TITLE MME MICHELENA, CONSUELO MIAMI, FL 33125 TITLE MME MME MICHELENA, CONSUELO MIAMI, FL 33125 TITLE MME MME MME MME STREET ADDRESS CITY-ST-ZIP TITLE MME STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE MME STREET ADDRESS STRE	the obligati کریائے SIGNATURE کے	ions of regist	ered agent.				The Company of the Co		oth, in the State of F		amiliar with,	and accept
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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.	indicated of the cor	on this repo poration or the	rt or supplemental report i ne receiver or trustee emp	s true a	and <u>accurate an</u> d that makes to be a courage and the course the c	the exe ny signa as requi	emption stated in Se ture shall have the ired by Chapter 607	ection 119.07(3) same legal effec 7, Florida Statute	(i), Florida Statutes of as if made under es; and that my nan	. I further certi oath; that I a ne appears in	fy that the in m an officer Block 10 or	formation or director Block 11 if
SIGNATURE: SIGNATURE A DESCRIPTION OF THE SIGNATURE AND TREE SIGNATURE SIGNATURE AND TREE SIGNATURE SIGNATURE AND TREE SIGNATURE	SIGNAT	URE: _	SIGNATURE AND TYPED 6	On by Ed	WINDS COME OF CERT	OR DIREC	TOR		7/27/04 Date	Da	ytime Phone #	