

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 24, 2005 8:00 am
Secretary of State

06-13-2005 90001 028 ***158.75

DOCUMENT # P99000041206
 1. Entity Name
 VEMI PARTNERS GROUP, CORP.



Principal Place of Business
 141 N.W. 25TH AVENUE
 MIAMI, FL 33125

Mailing Address
 141 N.W. 25TH AVENUE
 MIAMI, FL 33125

66023724



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

04272005 Chg-P CR2E034 (10/03)

City & State
 Zip Country

4. FEI Number
 65-0917440

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 MICHELENA, PEDRO P
 141 N.W. 25TH AVENUE
 MIAMI, FL 33125

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MICHELENA, PEDRO P 141 N.W. 25TH AVENUE MIAMI, FL 33125	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MICHELENA, CONSUELO 141 NW 25 ST. MIAMI, FL 33125	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: _____ DATE: 4/21/05 DAYTIME PHONE # _____
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR
 Pedro P. Michelena
 PRESIDENT

Annual Report Form 99000041206

ATTACHMENT

66023724

P99000041206

IBLINK

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THE INT'L BANK OF MIAMI, N.A.

ORIGINAL CHECK MAILED ON 4/21/05

CHECK NO 249 AMOUNT \$158.75

MEMO TO THE ORDER OF

VEMI PARTNERS GROUP CORP.
141 NW 25 AVENUE
MIAMI, FLORIDA 33125

DATE 4/21/05 30087873

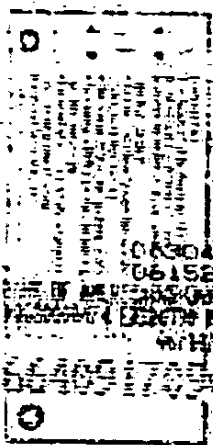
PAY TO THE ORDER OF FLORIDA DEPT OF STATE DIV OF CORP \$ 15
ONE HUNDRED FIFTY EIGHT DOLLARS AND 75/100 DOLL

THE INTERNATIONAL BANK OF MIAMI, N.A.
DOC: P99000041206
FOR: FEI: 650917440

PRESIDENT: [Signature]

THE INT'L BANK OF MIAMI, N.A.

BACK SIDE check NO 249



IBLINK

2013 410004



CHECK PAID BY OUR BANK

PAID