

2005 **FOR PROFIT CORPORATION
ANNUAL REPORT**

1082

DOCUMENT # P99000072277

1. Entity Name
VIANA INVESTMENTS CORPORATION



05 JUL -1 PM 11:20
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
**9521 Sunrise Lakes Blvd., Suite 101
Sunrise, Florida 33322 Same**



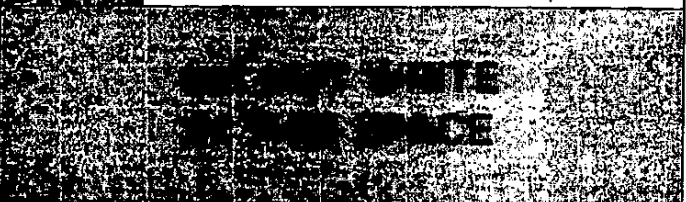
DO NOT WRITE IN THESE SPACES

05112004 No Chg-P CR2E034 (10/03) 05

4. FEI Number **65-0945899** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**ALBA N. CASTILLO,
9521 Sunrise Lakes Blvd., #101
Sunrise, Florida 33322**



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 Alba N. Castillo DATE 6/27/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

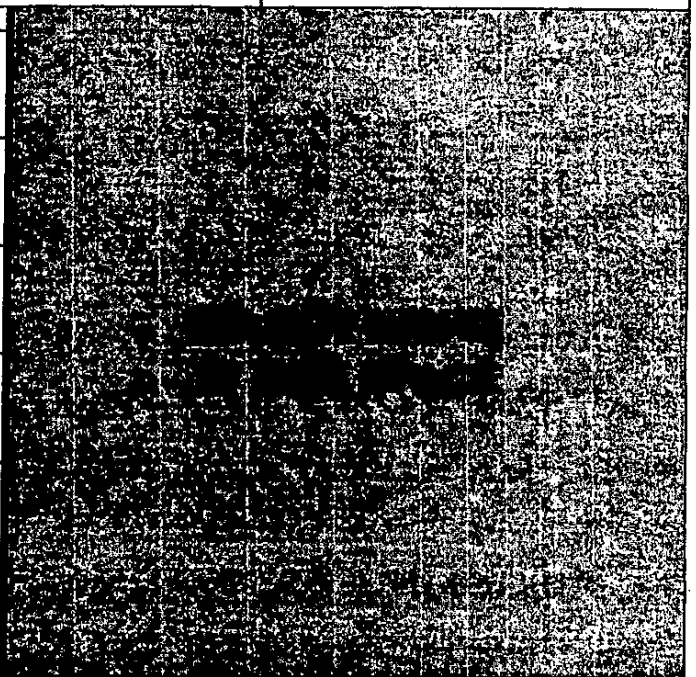
**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

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

600057344906
07/12/05--01035--006 **150.00

10. **OFFICERS AND DIRECTORS**

TITLE	P
NAME	CASTILLO, ALBA N
STREET ADDRESS	9521 SUNRISE BLVD #101
CITY-ST-ZIP	SUNRISE, FL 33322
TITLE	T
NAME	CASTILLO, ALBA
STREET ADDRESS	9521 SUNRISE BLVD #101
CITY-ST-ZIP	SUNRISE, FL 33322
TITLE	S
NAME	CASTILLO, ALBA
STREET ADDRESS	9521 SUNRISE BLVD #101
CITY-ST-ZIP	SUNRISE, FL 33322
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	



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 persons empowered.

SIGNATURE: Alba N. Castillo DATE 6/27/05
SIGNATURES AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2052

VIANA INVESTMENT CORPORATION
9521 Sunrise Lakes Blvd., #101
Sunrise, Florida 33322

May 10, 2004

Florida Department Of State
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida

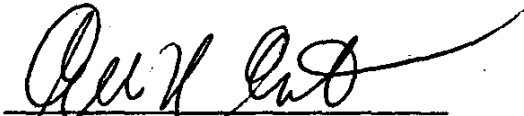
RE: ANNUAL REPORT NOTICE
P99000072277

Dear Sisrs:

This is to inform you that I did not receive a notice as to filing annual report. I talked to my accountant and I made a copy of last year's report and made the necessary corrections.

Please file my annual report and I am hereby enclosing the filing fee of \$150.00 which is the fee that should have been paid if the notice had been received.

Sincerely,



AYBA N. CASTILLO,
President