2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000073832

Entity Name: LOVO CORPORATION

FILED Feb 23, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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% 420 E 8TH STREET, #219 1790 WEST 49TH STREET HIALEAH, FL 33010

305-6

HIALEAH, FL 33012 US

Current Mailing Address: New Mailing Address:

% 420 E 8TH STREET, #219 1790 WEST 49TH STREET HIALEAH, FL 33010

305-6

HIALEAH, FL 33012 US

FEI Number: 65-0988033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

> LOVO, LILLIAM 420 EAST 8TH STREET 219 HIALEAH, FL 33010 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: LILLIAM LOVO 02/23/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

CURTIS, MAYNOR Name: Name: COORTUS, I EIDIAINA F

420 E 8TH STREET #219 1790 WEST 49TH STREET STE 305-6 Address: Address:

City-St-Zip: HIALEAH, FL 33010 City-St-Zip: HIALEAH, FL 33012 US

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

Name: Name: CURTIS, MAYNOR

1790 WEST 49TH STREET STE 305-6 Address: Address:

HIALEAH, FL 33012 US City-St-Zip: City-St-Zip:

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

Name: ANDRADE, LUIS A Name:

1790 WEST 49TH STREET STE 305-6 Address Address:

City-St-Zip: City-St-Zip: HIALEAH, FL 33012 US

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: MAYNOR CURTIS **VPD** 02/23/2004