

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000076362

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: NATURAL OPTION CORPORATION

## Current Principal Place of Business:

2828 CORAL WAY  
#206  
MIAMI, FL 33145

## New Principal Place of Business:

## Current Mailing Address:

2828 CORAL WAY  
#206  
MIAMI, FL 33145

## New Mailing Address:

FEI Number: 65-0944186

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASTILLO, ALVARO B P.A.  
1390 BRICKELL AVENUE  
SUITE 200  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MUHARRAM, ADHEMAR  
Address: 247 SHORE DRIVE EAST  
City-St-Zip: MIAMI, FL 33133

Title: VP ( ) Delete  
Name: MUHARRAM, CLAUDIA  
Address: 247 SHORE DRIVE EAST  
City-St-Zip: MIAMI, FL 33133

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ADHEMAR MUHARRAM

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date