2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000082138

Entity Name: PALMAREJO CORP.

FILED Feb 18, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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420 ISLAND DR.

KEY BISCAYNE, FL 33149

Current Mailing Address: New Mailing Address:

420 ISLAND DR.

KEY BISCAYNE, FL 33149

FEI Number: 65-0950305 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

UTRERA, NATALIA
1840 CORAL WAY, RM 304
MIAMI, FL 33145
US
PIEDRA, AURELIO
780 NW 42 AVENUE
SUITE 516
MIAMI, FL 33126 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: AURELIO A PIEDRA 02/18/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

KEY BISCAYNE, FL 33149

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: RINCON, JULIELA E Address: 420 ISLAND DR. RINCON Address: 420 ISLAND DR. Address: 420 ISLAND DR.

City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: KEY BISCAYNE, FL 33149

Title: VP () Delete Title: () Change () Addition

 Name:
 RINCON, VALERIO F
 Name:

 Address:
 420 ISLAND DR.
 Address:

 City-St-Zip:
 KEY BISCAYNE, FL 33149
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

Name: RINCON DE ZYBERMAN, ALBA Name:
Address: 420 ISLAND DR. Address:

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.

City-St-Zip:

SIGNATURE: VALERIO RINCON VP 02/18/2005