2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000084658

Entity Name: EASTERN EXCHANGE CORP.

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LEBRIJA, BERNARDO

LEBRIJA, LORENZO

LEBRIJA, JOSE A

DVS

252 WASHINGTON AVENUE

HOMESTEAD, FL 33030 US

252 WASHINGTON AVENUE

HOMESTEAD, FL 33030 US

252 WASHINGTON AVENUE

HOMESTEAD, FL 33030 US

Title:

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

FILED Apr 21, 2005 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:				
252 WASHINGTON AVENUE HOMESTEAD, FL 33030 US					4712 COUNTRY CLUB RD. SUITE A WINSTON-SALEM, NC 27104 US				
Current Mailing Address:					New Mailing Address:				
2201 OLD LEXINGTON ROAD WINSTON-SALEM, NC 27107 US					4712 COUNTRY CLUB RD. SUITE A WINSTON-SALEM, NC 27104 US				
FEI Number:	65-0948623	FEI Numbe	er Applied For()	FEI Num	ber Not Appli	cable ()	Certific	cate of Status Desire	d ()
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:				
LEBRIJA, LORENZO 252 WASHINGTON AVENUE HOMESTEAD, FL 33030 US					LEBRIJA, LORENZO 555 NE 15TH STREET APT. 607 MIAMI, FL 33132 US				
The above in the State		ubmits this	statement for the pu	urpose of	changing it	s register	ed office or	registered agent,	or both,
SIGNATURE:					04/21/2005				
Electronic Signature of Registered Agent					Date				
Election Can	npaign Financing	Trust Fund	Contribution ().						
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	DCP () I LEBRIJA, JUAN (2635 CAMINO D SAN DIEGO, CA	EL RIO SOU	TH # 309		Title: Name: Address: City-St-Zip:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	DVT () I LEBRIJA, JUAN 2201 OLD LEXIN WINSTON-SALE	NGTON ROA			Title: 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.

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

DV

DVS

LEBRIJA, BERNARDO

LEBRIJA, LORENZO

LEBRIJA, JOSE A

4712 COUNTRY CLUB RD. STE. A

WINSTON-SALEM, NC 27104 US

4712 COUNTRY CLUB RD. STE. A

WINSTON-SALEM, NC 27104 US

4712 COUNTRY CLUB RD. STE. A

WINSTON-SALEM, NC 27104 US

SIGNATURE: JUAN CARLOS LEBRIJA DVT 04/21/2005

(X) Change () Addition

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