

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000091753

FILED
Jun 30, 2005
Secretary of State

Entity Name: ADVENTURE GROUP OF FLORIDA, INC.

Current Principal Place of Business:

4854 EAST 9TH COURT
HIALEAH, FL 33013

New Principal Place of Business:

Current Mailing Address:

4854 EAST 9TH COURT
HIALEAH, FL 33013

New Mailing Address:

FEI Number: 65-0953529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IGLESIAS, ADOLFO E
12010 SW 97TH STREET
MIAMI, FL 331862606 US

Name and Address of New Registered Agent:

IGLESIAS, ADOLFO E
13170 SW 128TH STREET
SUITE # 203
MIAMI, FL 331862606 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: ADOLFO E IGLESIAS

06/30/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ORDIALES, MARIA L
Address: 4854 EAST 9TH COURT
City-St-Zip: HIALEAH, FL 33013

Title: DV () Delete
Name: ORDIALES, ANGEL
Address: 4854 EAST 9TH COURT
City-St-Zip: HIALEAH, FL 33013

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: MARIA L ORDIALES

DP

06/30/2005

Electronic Signature of Signing Officer or Director

Date