

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000094195

FILED  
Mar 31, 2005  
Secretary of State

Entity Name: FIRST CLASS FINANCIAL SERVICES, INC.

## Current Principal Place of Business:

8009 NW 36 STREEET  
SUITE 204  
MIAMI, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

8009 NW 36 STREEET  
SUITE 204  
MIAMI, FL 33166

## New Mailing Address:

FEI Number: 65-0956871      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIBERA, JUAN P  
8009 NW 36 STREEET  
SUITE 204  
MIAMI, FL 33166 US

## Name and Address of New Registered Agent:

RIBERA, JUAN P  
8009 NW 36 STREEET  
SUITE 204  
DORAL, FL 33166 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: JUAN RIBERA

03/31/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RIBERA, JUAN P  
Address: 15315 SW 52ND TERRACE  
City-St-Zip: MIAMI, FL 33185

Title: SD ( ) Delete  
Name: RIBERA, NANCY  
Address: 15315 SW 52ND TERRACE  
City-St-Zip: MIAMI, FL 33185

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: RIBERA, JUAN P  
Address: 3390 SW 129 AVENUE  
City-St-Zip: MIAMI, FL 33185

Title: SD (X) Change ( ) Addition  
Name: RIBERA, NANCY  
Address: 11218 SW 117 PLACE  
City-St-Zip: MIAMI, FL 33186

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: JUAN RIBERA

PD

03/31/2005

Electronic Signature of Signing Officer or Director

Date