2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

May 12, 2004 08:00 AM Secretary of State DOCUMENT # P99000101750 1. Entity Name SAN ANGEL TEXTERS, INC. Principal Place of Business Mailing Address 4438 PINE LAKE ROAD 4438 PINE LAKE ROAD BONITA SPRINGS, FL 34134 BONITA SPRINGS, FL 34134 05032004 CR2E034 (10/03) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3611531 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CASTRO, ISMAEL DO NOT WRITE 4438 PINE LAKE ROAD BONITA SPRINGS, FL 34134 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Progistered Agent signature required when revisitating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 8, 2004 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS HILE CASTRO, ISMAEL NAME STREET ADDRESS 4438 PINE LAKE ROAD U00000159854 CITY-ST-ZIP BONITA SPRINGS, FL 34134 05/12/04-80002-009 158.75 TITLE NAME CASTRO, JOSE L 5 FOURTH STREET STREET ADDRESS CITY-ST-ZIP BONITA SPRINGS, FL 34134 NAME STREET ADDRESS DO NOT WRITE CITY ST ZIP HEE IN THIS SPACE NAME STREET ADDRESS City-St-Zip TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED