## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000106126

Entity Name: COURSE OF ACTION, INC.

MANZANO, HÌLDA M

7400 RADICE COURT, #602

LAUDERHILL, FL 33319

Name:

Address:

City-St-Zip:

FILED Apr 29, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4971 N. UNIVERSITY DR., STE. 14 A LAUDERHILL, FL 33351 **Current Mailing Address: New Mailing Address:** 4971 N. UNIVERSITY DR., STE. 14 A LAUDERHILL, FL 33351 FEI Number: 59-3616497 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MONTESDEOCA, JUAN F 7035 NW 186 STREET 310D MIAMI, FL 33015 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition CARDENAS, DANILO E Name: Name: 10282 BOCA ENTRADA BLVD., #224 Address: Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: Title: **VPD** () Delete Title: () Change () Addition MONTESDEOCA, DIEGO Name: Name: 7400 RADICE COURT, # 602 Address: Address: LAUDERHILL, FL 33319 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: VPD () Change () Addition MONTESDEOCA, JULIA E Name: Name: 10282 BOCA ENTRADA BLVD., #224 Address: Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: Title: STD () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DIEGO MONTESDEOCA **VPD** 04/29/2004