## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000106865

Address:

City-St-Zip:

FILED May 10, 2004 Secretary of State

Entity Name: AGENCIA 12 Y 23, INC. **Current Principal Place of Business: New Principal Place of Business:** 4625 N. LOIS AVENUE TAMPA, FL 33614 **Current Mailing Address: New Mailing Address:** 4625 N. LOIS AVENUE TAMPA, FL 33614 FEI Number: 59-3613145 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: MENDOZA, JOSE E 4513 W. JEAN ST TAMPA, FL 33614 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 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition LOPEZ, OLGA C MENDOZA, JOSE E Name: Name: 4513 W. JEAN ST 4513 W. JEAN ST Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33614 Title: VPT Title: VΡ () Delete (X) Change ( ) Addition Name: LOPEZ, ROBERTO Name: LOPEZ, ROBERTO 4513 W. JEAN ST 4513 W. JEAN ST Address: Address: TAMPA, FL 33614 TAMPA, FL 33614 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition CM MENDOZA, JOSE E LOPEZ, OLGA C Name: Name: 4513 W. JEAN ST 4513 W. JEAN ST Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33614 Title: () Delete Title: ( ) Change (X) Addition MENDOZA, JADE L Name: Name:

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.

Address:

City-St-Zip:

4513 WEST JEAN ST

TAMPA, FL 33614

SIGNATURE: JOSE E MENDOZA PM 05/10/2004