2004 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 08, 2004 08:00 AM DOCUMENT # S40275 **Secretary of State** 1. Entity Name VIZCAYA ART INC. Principal Place of Business Mailing Address 1499 BRANDYWINE CIR 1499 BRANDYWINE CIR **APT 311** APT 311 FT MYERS, FL 33919 US FT MYERS, FL 33919 No Chg-P CR2E034 (10/03) 07062004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0252229 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BENEFIELD, KIRK A DO NOT WRITE 1499 BRANDYWINE CIR **APT 311** IN THIS SPACE FT MYERS, FL 33919 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS 10. TITLE BENEFIELD, KIRK A NAME #00000164562 #7708704-80013-022 158,75 1499 BRANDYWINE CIR #311 STREET ADDRESS FT MYERS, FL 33919 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/04

FILED

Daytime Phone 4