## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 11, 2005 8:00 am Secretary of State **DOCUMENT # S45416** 04-11-2005 90180 045 \*\*\*150.00 1. Entity Name LOS ARRIEROS, INC. Principal Place of Business Mailing Address 50035956 10995 SW 40TH ST 10995 SW 40TH ST MIAMI, FL 33165 MIAMI, FL 33165 CR2E034 (10/03) 03222005 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0276683 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TEJADA, MARIASOL DO NOT WRITE 10995 SW 40TH ST MIAMI, FL 33165 IN THIS SPACE 6. 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 (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10 PSTD TITLE NAME TEJADA, MARIASOL 10665 SW 40TH ST STREET ADDRESS CITY-ST-ZIP MIAMI, FL -33165 IIILE NAME STREET ADDRESS CITY-ST-ZIP me NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE 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 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

**FILED**