

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S90902

Entity Name: OJM.RR CORPORATION

FILED  
Jan 11, 2005  
Secretary of State

## Current Principal Place of Business:

P.O.BOX 347135  
CORAL GABLES, FL 332347135

## New Principal Place of Business:

2630 SW 28TH STREET  
SUITE 61  
MIAMI, FL 33133

## Current Mailing Address:

P.O.BOX 347135  
CORAL GABLES, FL 332347135

## New Mailing Address:

2630 SW 28 STREET  
SUITE 61  
MIAMI, FL 33133

FEI Number: 65-0327639

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONTEAGUDO, OMAIDA  
P.O. BOX 347135  
CORAL GABLES, FL 332347135 US

## Name and Address of New Registered Agent:

RUA, OMAIDA  
2630 SW 28TH STREEET  
SUITE 61  
MIAMI, FL 33133 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: CARLOS M. RUA

01/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: MONTEAGUDO, OMAIDA  
Address: 1304 LISBON STREET  
City-St-Zip: CORAL GABLES, FL 33134

Title: P ( ) Delete  
Name: RUA, CARLOS M SR  
Address: P.O.BOX 347135  
City-St-Zip: CORAL GABLES, FL 332347135

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition  
Name: RUA, OMAIDA  
Address: 2630 SW 28TH STREET, SUITTE 61  
City-St-Zip: MIAMI, FL 33133

Title: P (X) Change ( ) Addition  
Name: RUA, CARLOS M SR  
Address: 2630 SW 28TH STREET, SUITE 61  
City-St-Zip: MIAMI, FL 33133

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.

SIGNATURE: OMAIDA RUA

P

01/11/2005

Electronic Signature of Signing Officer or Director

Date