2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 01, 2005 8:00 am Secretary of State

1. Entity Nam	MENT # V12467					04-01-2003	5 9001 5 02	8 ***15	0.00
Principal Place of Business ONE SE THIRD AVENUE 28TH FLOOR MIAMI, FL 33131		Mailing Address ONE SE THIRD AVENUE 28TH FLOOR MIAMI, FL 33131							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03082005	Chg-P	CR2E034	(10/03)		
City & State		City & State		4. FEI Number 68-0557			_ 	plied For Applicable	
Zip	Country	Zip	Coun	itry		f Status Desired		8.75 Add e Required	
	6. Name and Address of Current	Registered Agent	- <u> </u>		7. Name and A	ddress of New	Registered Ag	ent	
AMEDICA:	N INFORMATION OFFICE		·	Name	الماء معينيات بالميد				•
AMERICAN INFORMATION SERVICES INC. 1 SE 3RD AVE 27TH FLOOR				Street Address (P.O. Box Number is Not Acceptable)					
MIAMI, FL									
				City			FL	Zip Code)
	named entity submits this statement fo tions of registered agent.	r the purpose of changing it	s register	ed office or regist	tered agent, or both	, in the State of F	lorida. I am fan	niliar with, a	and accept
SIGNATURE.	Signature, typed or printed name of registered agent	and title it enplicable (NO	TF: Renistere	; id Agent signature requi	red when reinstation)		DATE		
	organica, typed or printed traine or registered agents.	and the trappication. (170	TE. Pogistoro	C Page 11 to grazulo 10 que	and with the total and the		DATE		
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee wiil be \$550.0	9. Election Camp: Trust Fund Cor			5.00 May Be dded to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OF	FICERS AND D	IRECTORS	IN 11
TITLE	D	☐ Delete	TITU	E \				Change	Addition
NAME	DUARTE, CARLOS H		NAM	- \					
STREET ADORESS CITY-ST-ZIP	ONE SE THIRD AVENUE, 28TH	FLOOR		EET ADDRESS	\				
TITLE	D	☐ Delete	πυ		$\overline{}$			Change	Addition
NAME	DUARTE, MARIA ELISA (DE)	m netera	NAM				L	change	Addition
STREET ADDRESS	ONE SE THIRD AVENUE, 28TH	FLOOR	STRE	EET ADDRESS					
CITY-ST-ZIP	MIAMI, FL 33131		CITY	'-ST-ZIP					
TITLE	P	☐ Delete	TITL	l			[Change	Addition
NAME STREET ADDRESS	DUARTE, GUILLERMO ONE SE THIRD AVENUE, 28TH	EI COR	NAM	EET ADORESS	\				
CITY-ST-ZIP	MIAMI, FL 33131	LOOK	• • • • • • • • • • • • • • • • • • • •	-ST-ZIP					
TITLE	ST.	□ Deleta	गा।		The state of the	. \	E	Change 🗸	Addition
NAME	DE CASTRO, MARIA ELENA		NAM						
STREET ADDRESS CITY-ST-ZIP	ONE SE THIRD AVENUE, 28TH MIAMI, FL 33131	FLOOR		EET ADORESS (-ST-ZIP					
TITLE	WINDOW, FE 35151	☐ Delete	TITL			$\overline{}$	Г	Change	Addition
NAME		C Décio	NAM	i			\		
STREET ADDRESS			1	EET ADDRESS					
CITY-ST-ZIP				(-ST-ZIP				-	
TITLE		☐ Delete	T!TL Nam				/[Change	☐ Addition
NAME STREET ADDRESS			•	EET ADDRESS					
CITY-ST-ZIP	1			/-ST-ZIP					

12. I hereby certify that the information supplied with this filling 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 eath; 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:	SIGNATURE AND TYPED OR PRINTED NAME OF SIGN	Carlos Duarte H.	3/17/05	(305) 936-164(