2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # V52327

1. Entity Name

STE - 325-A

Principal Place of Business

MIAMI, FL 33126 US

780 N W LEJEUNE RD

RAMON M. RODRIGUEZ, ESQUIRE, P.A.



Mailing Address

780 N W LEJEUNE RD

STE - 325-A MIAMI, FL 33126 U

...

FILED Mar 24, 2004 08:00 AM Secretary of State



01052004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0348560

Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, RAMON M 780 N W LEJEUNE RD STE - 325-A

STE - 325-A MIAMI, FL 33126

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IVIIAIVII, FL	33120			** **		
	named entity submits this statement for the irons of registered agent.	purpose of changing its registe	red office or	registered agent, or	both) the State of Florida I am familiar with, and	accept
SIGNATURE_	Signature Typed or printed name of registered agent and trite it	applicable (NOTE Registered	Agent signature n	equired when re-instating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		000000095111 03/24/04-80019-019 158.75		
10. OFFICERS AND DIRECTORS						-
TITLE	D					
NAME	RODRIGUEZ, RAMON M	-				
STREET ADDRESS	780 N W LEJEUNE ROAD	-				
CITY-ST-ZIP	MIAMI, FL					
TITLE						
NAME						
STREET ADDRESS						
CITY - ST - ZIP						
TITLE						
NAME STREET ADDRESS				_		
CITY-ST-ZIP				DO	NOT WRITE	
				_		
TITLE NAME				IN	THIS SPACE	
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 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; at 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-ZEP

STREET ADDRESS CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

RAMON NO. RODRIGUEZ 305-448-