

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V54860

FILED  
Mar 11, 2004  
Secretary of State

Entity Name: SENSATIONAL PUBLISHING & ADVERTISING CORP.

## Current Principal Place of Business:

275 FONTAINEBLEAU BLVD  
SUITE 168  
MIAMI, FL 33172 US

## Current Mailing Address:

275 FONTAINEBLEAU BLVD  
SUITE 168  
MIAMI, FL 33172 US

FEI Number: 65-0399276

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAGEN, MAX M.  
3531 GRIFFIN ROAD  
FORT LAUDERDALE, FL 33312 US

## New Principal Place of Business:

275 FONTAINEBLEAU BLVD  
SUITE 168  
MIAMI, FL 33172

## New Mailing Address:

275 FONTAINEBLEAU BLVD  
SUITE 168  
MIAMI, FL 33172

## Name and Address of New Registered Agent:

RAMOS, MARTA R  
275 FONTAINEBLEAU BLVD  
SUITE 168  
MIAMI, FL 33172

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: MARTA R. RAMOS

03/11/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: RAMOS, MARTA,  
Address: 717 NW 131 AVE  
City-St-Zip: MIAMI, FL 33182

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: RAMOS, MARTA R  
Address: 717 NW 131 AVE  
City-St-Zip: MIAMI, FL 33182

Title: D ( ) Change (X) Addition  
Name: HANONO, EDUARDO  
Address: 717 NW 131 AVE  
City-St-Zip: MIAMI, FL 33182

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: MARTA R. RAMOS

PD

03/11/2004

Electronic Signature of Signing Officer or Director

Date