


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 25, 2004 8:00 am
Secretary of State

05-25-2004 90002 027 ***150.00

DOCUMENT# P99000071240

1. EntityName
 AIBREALTYHOLDINGCO.



PrincipalPlaceofBusiness MailingAddress

1925 BRICKELL AVE STE D206 1925 BRICKELL AVE STE D206
 MIAMI, FL 33129 MIAMI, FL 33129

43010074



02162004 NoChg-P CR2E034(10/03)

DO NOT WRITE IN THIS SPACE

4. FEINumber 65-1108930	AppliedFor NotApplicable
5. CertificateofStatusDesired <input type="checkbox"/>	\$8.75 Additional FeeRequired

6. NameandAddressofCurrentRegisteredAgent

MIAMICORPORATEREGISTRY
 1925BRICKELLAVESTED206
 MIAMI,FL33129

DO NOT WRITE IN THIS SPACE

8. Theabovenamedentitysubmits thisstatementfor thepurposeof changingitsregisteredofficeorregisteredagent, orboth, intheStateofFlorida. Iamfamiliarwith, andaccept theobligationsofregisteredagent.

SIGNATURE _____ (NOTE:RegisteredAgentsignaturerequiredwhenever instating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00


9. ElectionCampaignFinancing TrustFundContribution. **\$5.00** MayBe AddedtoFees

10. OFFICERSANDDIRECTORS

TITLE NAME STREETADDRESS CITY - ST - ZIP	S BESU, ROGER 1925BRICKELLAVESTED206 MIAMI, FL33129
TITLE NAME STREETADDRESS CITY - ST - ZIP	DP BARAKAT America GRANVIA#8LOMASDEURDESA GUAYAGUIL, ECUADOR,
TITLE NAME STREETADDRESS CITY - ST - ZIP	
TITLE NAME STREETADDRESS CITY - ST - ZIP	
TITLE NAME STREETADDRESS CITY - ST - ZIP	
TITLE NAME STREETADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. IherbycertifythattheinformationsuppliedwiththisfilingdoesnotqualifyfortheexemptionstatedinSection119.07(3)(i), FloridaStatutes. Ifurthercertifythattheinformation indicatedonthisreportorsupplementalreportistrueandaccurateandthatmysignatureshallhavethesamelegaleffectasifmadeunderoath; thatamanofficerordirector ofthecorporationorthereceiverortrusteeempoweredtoexecutethisreportasrequiredbyChapter607, FloridaStatutes; and thatmynameappearsinBlock 10orBlock 11if changed, oronanattachmentwith an address, withallotherlikeempowered.

SIGNATURE:  **5-1-04** **305-854-6363**

SIGNATUREANDTYPEDORPRINTEDNAMEOFSIGNINGOFFICERORDIRECTOR Date DaytimePhone#