2006 FOR PROFIT CORPORATION ANNUAL REPORT

OSUALDO MAYORAL

MAMI, FL. 33145 2300 CORAL MAY SUITE 200 MAMI, FL. 33145 2. Principal Prace of Business Suite, Apt. #, etc. City & State City & FL Zip Code The above named early submits that statement for the purpose of chenging its registered office or registered agent, or both, in the State of Fortica. I am formitism with, and acceptate the obligations of registered agent. SIGNATURE City FL Zip Code The above named early submits that statement for the purpose of chenging its registered office or registered agent, or both, in the State of Fortica. I am formitism with, and acceptate the obligations of registered agent. SIGNATURE City FL Zip Code The above named early submits that statement for the purpose of chenging its registered office or registered agent, or both, in the State of Fortica. I am formitism with, and acceptate the obligations of registered agent. SIGNATURE City FL Zip Code The above named early submits that statement for the purpose of chenging its registered office or registered agent, or both, in the State of Fortica. I am formitism with, and acceptate the obligations of registered agent. SIGNATURE Difference of the code of the	DOCUI 1. Entity Nam LA ROSA	е	# 328123 NC.					FILED 06 MAR 28 PM 2: 13				
Suite, Api, 4, etc. City A State	2300 CORAL WAY SUITE 200			2300 CORAL WAY Suite 200								
City & Sales Country Special Country	2. Principal P	lace of Busin	ess	3. Mailing Address								
S. Name and Address of Current Registered Agent FLORIDA ANNUAL REPORT SERVICES INC 2300 COPAL WAY SUITE 200 MIAM, FL 33145 FL Brown mand and submitted in the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am floredar with, and accept ince obligations of registered agent of registered agent of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am floredar with, and accept ince obligations of registered agent of registered agent of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am floredar with, and accept ince obligations of registered agent of registered agent of the floredar with, and accept ince obligations of registered agent	Suite, Apt. #, etc.			Suite, Apt. #, etc.			02172006	Chg-P	CR2E03	4 (11/05)		
S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Fig. Round Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	City & State			City & State			I					
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Special Address (P.O. Box Number is Not Acceptable) Special Address (P.O. Box Number is Not Acceptable) City FL Zip Code 6. The above named entity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am furnitiar with, and accept the obligations of registered agent. SIGNATURE Square, you'd grand-army of registered agent exists 4 septicable. FILE NOWILL PEE IS \$190.00 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 INC. MAYORAL, OSVALDO SIRET ADDRESS OTI-57-29 MAYORAL, MERCEDES MAYORAL MERCED		6. Name	and Address of Current									
SUTINE 200 MIAMI, FL 33145 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floride. I am familiar with, and accept the obligations of registered agent and test 4 spotsable. City FL Zip Code			REPORT SERVICES		Street Address (P.O. Box Number is Not Acceptable)							
E. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: City FL Zip Code	SUITE 200)										
B. 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. I am familiar with, and accept the obligations of registered agent. Signature	MIAMI, FL	33145			City Zip Code							
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NAME SIRET ADDRESS CITY-ST-2P MIAMI, FL SIRET ADDRESS CITY-ST-2P 12. I hereby cetify that the information auppties with hits filing does not qualify for the exercited in Chapter 119, Florids Statutes. I further certify that the information of the copposition or the receiver or instead empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if chapter or an author or director of changed, or on an attachment with an address with all observed the empowered. SIGNATURE: MAYORAL DESCRIPTIONS CITY-ST-2P Addition MAXORA SIRET ADDRESS CITY-ST-2P TITLE TIT		Б	OFFICERS AND		_		ADDITIONS	CHANGES TO OFF				
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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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: 3-15-06 305-856-0056	NAME Street adoress		\$	$R_{3/26}$	NAA STR	AE EET ADDRESS				☐ Change	Addition	
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