


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2006 08:00
Secretary of State

DOCUMENT # F96000002134
 1. Entity Name
PEBAR, INC.



Principal Place of Business Mailing Address
C/O DON M SALLINGER ESQ. **MR. GONZALO I. BARRIOS**
5925 FOREST LANE SUITE 110 **321 S.W. 121ST AVENUE**
DALLAS, TX 75230 **MIAMI, FL 33184**

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01152006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
75-2585643 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

8. Name and Address of Current Registered Agent
LYNN, JOHN M ESQ
LYNN & HANSON, P.A.
48 N.E. 15 STREET, SECOND FLOOR
HOMESTEAD, FL 33030

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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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BARRIOS, ELIGIO
STREET ADDRESS	321 S.W. 121ST AVENUE
CITY-ST-ZIP	MIAMI, FL 33184
TITLE	VP
NAME	HALL, ELAINE
STREET ADDRESS	321 S.W. 121ST AVENUE
CITY-ST-ZIP	MIAMI, FL 33184
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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: *(Eligio Barrios)* Feb-08/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #