2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State
03-13-2006 90055 009 ***150.00

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1. Entity Name
MIAMI FOREST VILLAS, INC.

Principal Place of Business	Mailing Address
326 SW 62ND AVE MIAMI, FL 33144	326 SW 62ND AVE MIAMI, FL 33144

DO NOT WRITE IN THIS SPACE

02232006 No Chg-P CR2E034 (11/05)

4. FEI Number
16-1676675
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CASTRO, PURA
326 SW 62ND AVE
MIAMI, FL 33144

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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: Pres. DATE: 2/23/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	PD
NAME	CASTRO, PURA
STREET ADDRESS	326 SW 62ND AVE
CITY-ST-ZIP	MIAMI, FL 33144
TITLE	VSD
NAME	CASTRO, MARIO
STREET ADDRESS	326 SW 62ND AVE
CITY-ST-ZIP	MIAMI, FL 33144
TITLE	T
NAME	LAMARCHE, LUISA
STREET ADDRESS	326 SW 62ND AVE
CITY-ST-ZIP	MIAMI, FL 33144
TITLE	D
NAME	SALAZAR VUST, CLARA
STREET ADDRESS	326 SW 62ND AVE
CITY-ST-ZIP	MIAMI, FL 33144
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: 2-23-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #