

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078720

FILED  
Mar 17, 2006  
Secretary of State

Entity Name: OPTIMA INTERNATIONAL SALES, INC.

**Current Principal Place of Business:**

905 S BRICKELL BAY DR, TOWER II,  
STE 1226  
MIAMI, FL 333133001

**New Principal Place of Business:**

**Current Mailing Address:**

905 S BRICKELL BAY DR, TOWER II,  
STE 1226  
MIAMI, FL 333133001

**New Mailing Address:**

FEI Number: 65-1041663      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

REGISTERED AGENT CORPORATE SERVICES INC.  
809 DOUGLAS ROAD  
SUITE 580  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D/P ( ) Delete  
Name: FACUSSE, LORENA  
Address: 905 S BRICKELL BAY DR, TOWER II, STE 1226  
City-St-Zip: MIAMI, FL 333133001

Title: VP ( ) Delete  
Name: FACUSSE, MIGUEL M  
Address: 905 S BRICKELL BAY DR, TOWER II, STE 1226  
City-St-Zip: MIAMI, FL 33133

Title: S ( ) Delete  
Name: RIVERA, MARIA A  
Address: 905 S BRICKELL BAY DR, TOWER II, STE 1226  
City-St-Zip: MIAMI, FL 33133

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MARIA A. RIVERA

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03/17/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date