


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90039 013 ***150.00

DOCUMENT # P01000031379
1. Entity Name
WAITANGI FLORIDA, INC.



Principal Place of Business Mailing Address
THERREL BAISDEN, P.A.
SUNTRUST INTL CNTR 1 SE 3RD AVE 2400 2450
MIAMI, FL 33131 THERREL BAISDEN, P.A.
SUNTRUST INTL CNTR 1 SE 3RD AVE 2400 2450
MIAMI, FL 33131

60016104



01102006 No Chg-P CR2E034 (11/05)

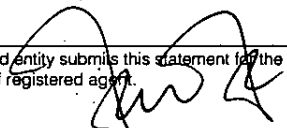
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| | |
|---|---------------------------------------|
| 4. FEI Number 52-2305786 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent
FEUERMAN, JONATHAN
THERREL BAISDEN, P.A.
SUNTRUST INTL. CNTR., 1 SE 3RD AVE., #2400 2450
MIAMI, FL 33131

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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:  DATE: _____

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

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 NAME STREET ADDRESS CITY-ST-ZIP | D ENTWISTLE, ROBERTA C/O SUNTRUST INTL. CNTR., 1 SE 3RD AV 2400 2450 MIAMI, FL 33131 |
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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:  01/26/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #