

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000036171

Entity Name: NUESTRO MUNDO, INC.

FILED  
Apr 17, 2006  
Secretary of State

**Current Principal Place of Business:**

3585 S. CONGRESS AVE.  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

314 BARCELONA RD.  
WEST PALM BEACH, FL 334017710

**New Mailing Address:**

314 BARCELONA RD.  
WEST PALM BEACH, FL 334017710 US

FEI Number: 65-1093436

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROY, DAVID R PA  
4209 N. FEDERAL HWY.  
POMPANO BEACH, FL 33064 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 ( ) Delete  
Name: ALLEN, ROSA DELUVINA  
Address: 314 BARCELONA RD  
City-St-Zip: WEST PALM BEACH, FL 334017710

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

Title: D (X) Change ( ) Addition  
Name: ALLEN, ROSA DELUVINA  
Address: 314 BARCELONA RD  
City-St-Zip: WEST PALM BEACH, FL 334017710 US

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: ROSA DELUVINA ALLEN

D

04/17/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date