

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003759

**FILED**  
**May 01, 2006**  
**Secretary of State**

**Entity Name:** LLERENA ENTERPRISES GROUP, INC.

**Current Principal Place of Business:**

17841 NW 54 AVE  
CAROL CITY, FL 33055

**New Principal Place of Business:**

**Current Mailing Address:**

17841 NW 54 AVE  
CAROL CITY, FL 33055

**New Mailing Address:**

**FEI Number:** 68-0593732      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LLERENA, AURELIA  
17841 NW 54 AVE  
CAROL CITY, FL 33055      US

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

LLERENA, AURELIO  
17841 NW 54 AVE  
CAROL CITY, FL 33055      US

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: AURELIO LLERENA

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: LLERENA, AURELIO  
Address: 17841 NW 54 AVE  
City-St-Zip: CAROL CITY, FL 33055

Title: VD      ( ) Delete  
Name: LLERENA, ROMAN  
Address: 17841 NW 54 AVE  
City-St-Zip: CAROL CITY, FL 33055

Title: STD      ( ) Delete  
Name: LLERENA, MARTHA  
Address: 17841 NW 54 AVE  
City-St-Zip: CAROL CITY, FL 33055

**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: AURELIO LLERENA

PD

05/01/2006

Electronic Signature of Signing Officer or Director

Date