

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000051455

FILED
Feb 13, 2006
Secretary of State

Entity Name: BOLCAR INTERNATIONAL, INC.

Current Principal Place of Business:

16500 COLLINS AVENUE
454
SUNNY ISLES, FL 33160

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD #740
CORAL GABLES, FL 33134

New Mailing Address:

6770 INDIAN CREEK 12L
MIAMI BEACH, FL 33141

FEI Number: 47-0869789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBAYNA, MIGUEL ANGEL
16500 COLLINS AVENUE
#454
SUNNY ISLES, FL 33160 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: PD () Delete
Name: ROBAYNA, MIGUEL ANGEL
Address: 16500 COLLINS AVENUE #454
City-St-Zip: SUNNY ISLES, FL 33160

Title: VT () Delete
Name: ROBAYNA, MARIA EUGENIA
Address: 76500 COLLINS AVE #454
City-St-Zip: SUNNY ISLES BCH, FL 33160

Title: S () Delete
Name: PIERI, LUCIANO N
Address: 16500 COLLINS AVENUE #454
City-St-Zip: SUNNY ISLES, FL 33160

Title: D () Delete
Name: RUEDA DE ROBAYNA, MIRTA SUSANA
Address: 16500 COLLINS AVE #454
City-St-Zip: SUNNY ISLES BCH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VT (X) Change () Addition
Name: ROBAYNA, MARIA EUGENIA
Address: 16500 COLLINS AVE #454
City-St-Zip: SUNNY ISLES BCH, FL 33160

Title: S (X) Change () Addition
Name: ROBAYNA, MARIA LAURA
Address: 16500 COLLINS AVENUE #454
City-St-Zip: SUNNY ISLES, FL 33160

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 EUGENIA ROBAYNA

VP

02/13/2006

Electronic Signature of Signing Officer or Director

_____ Date