2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 18, 2006 08:00 AM Secretary of State

305-256-6855

1. Entity Nam R.J. APPI	Raisals, INC.	67		S	ecretary	of State
Principal Place 15200 SW 16 MIAMI, FL 33	S7TH ST	Mailing Address 15200 SW 167TH ST MIAMI, FL 33187	· -·		-	
	6. Name and Address of Current Re		200 and 200 an	01152006 No Ch 4. FEI Number 30-0099247 5. Certificate of Status E	g-P CR2E00	34 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
HOLLANDER, MARK 11410 N KENDALL DR STE 207 MIAMI, FL 33176			DO NOT WRITE IN THIS SPACE			
the obligated signature.	named entity submits this statement for the following of registered agent. Signature, typed or printed name of registered agent and R. NOWILL FEE 13 \$150.00 ay 1, 2006 Fee will be \$550.00	in it application (NOTE: Régisse 9. Election Campaign Fin Trust Fund Contribution	ared Again signature required	· .	DATE	amiliar with, and accept
10. ITILE NAME STREET ADDRESS GITY-ST-ZIP ITILE NAME STREET ADDRESS GITY-ST-ZIP	DP JIMENEZ, ROBERTO 15200 SW 167TH ST MIAMI, FL 33187	HECTORS		U0 	0000330563 /06-80004-	008 150.00
TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP				DO NO IN THIS	T WRITE	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	catify that the information runniled with the	ois filing does not revelify for this	skámptions containe	d in Chapter 119 Florida 5	statutes. I further con-	Lify that the information
indicated of the co	certify that the information supplied with the or this report or supplemental report is troporation or the receiver or trustee empower, or on an attachment with an address, will	ue and accurate and that my sig- ered to execute this report as ret th all other like empowered.	nature shall have the quired by Chapter 60	same legal effect as if man 7, Florida Statutes; and tha	le under oath, that I at my name appears it	am an officer or director n Block 10 or Block 11 if