

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000101443

Entity Name: ZANATTA SPECIALTY COMPANY

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

3553 WILES ROAD STE 107
COCONUT CREEK, FL 33073

New Principal Place of Business:

3553 WILES ROAD
SUITE 107
COCONUT CREEK, FL 33073

Current Mailing Address:

3577 WILES ROAD STE 202
COCONUT CREEK, FL 33073

New Mailing Address:

3577 WILES ROAD
SUITE 107
COCONUT CREEK, FL 33073

FEI Number: 22-3872742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE ROAD
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: PSD () Delete
Name: ZANATTA, FABIO JOSE
Address: 3577 WILES ROAD STE 202
City-St-Zip: COCONUT CREEK, FL 33073

Title: PTD () Delete
Name: MOURA, IVON CARLOS
Address: 3935 COCOPLUN CIRCLE
City-St-Zip: COCONUT CREEK, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: ZANATTA, FABIO JOSE
Address: 3577 WILES ROAD STE 107
City-St-Zip: COCONUT CREEK, FL 33073

Title: PTD (X) Change () Addition
Name: MOURA, IVON CARLOS
Address: 3577 WILES ROAD STE 107
City-St-Zip: COCONUT CREEK, FL 33073

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: IVON CARLOS MOURA

PTD

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date