

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90296 017 ***150.00

DOCUMENT # P03000051761

1. Entity Name
ANDRI CHEMICAL OF AMERICA, INC.



Principal Place of Business
**2221 SW 59TH AVE
HOLLYWOOD, FL 33023**

Mailing Address
**2221 SW 59TH AVE
HOLLYWOOD, FL 33023**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

40000000



04262006 Chg-P CR2E034 (11/05)

4. FEI Number
02-0691891

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LOOMAR, L. GREGORY
1152 NORTH UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

7. Name and Address of New Registered Agent

Name
ONDINA PEREZ-MENA

Street Address (P.O. Box Number is Not Acceptable)
5424 SW 186TH WAY

City
MIRAMAR FL Zip Code
33029

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **ONDINA PEREZ-MENA DIRECTOR** *ONDINA PEREZ-MENA* **4/26/06**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** Delete
NAME **PEREZ-MENA, ONDINA D**
STREET ADDRESS **5424 SW 186TH WAY**
CITY-ST-ZIP **MIRAMAR, FL 33029**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** Delete
NAME **PEREZ-MENA, LUIS**
STREET ADDRESS **5424 SW 186TH WAY**
CITY-ST-ZIP **MIRAMAR, FL 33029**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** Delete
NAME **PEREZ-MENA, MARGARITA**
STREET ADDRESS **5424 SW 186TH WAY**
CITY-ST-ZIP **MIRAMAR, FL 33029**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *LUIS PEREZ-MENA* **LUIS PEREZ-MENA** **4/26/06 (954) 964 7007**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #