

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

8/1/2006-90003-037-\$150.00-\$150.00

FILED

192

DOCUMENT # P04000139892

1. Entity Name
OLA GROUP, INC.



06 OCT 11 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**13800 SW 8 ST - # 117
MIAMI, FL 33184**

Mailing Address
**13800 SW 8 ST - # 117
MIAMI, FL 33184**

50023751



02162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1655961

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**OLIVERA, JORGE
13800 SW 8 ST, # 117
MIAMI, FL 33184**

**DO NOT WRITE
IN THIS SPACE**

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 *[Signature]* *Vivianka Lavin* **2-15-06**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) 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

TITLE	D
NAME	OLIVERA, JORGE
STREET ADDRESS	13800 SW 8 ST, #117
CITY- ST- ZIP	MIAMI, FL 33184
TITLE	D
NAME	LAVIN, VIVIANKA
STREET ADDRESS	13800 SW 8 ST, #117
CITY- ST- ZIP	MIAMI, FL 33184
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 registered agent 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 or without, with all other like empowered.

SIGNATURE: *[Signature]* **2-15-06 (305) 322-0260**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Daytime Phone #)

ATTACHMENT

50023751
~~#004000139892~~

Ola Group, Inc.
13800 SW 8 St # 117
Miami, Florida 33184

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July 18, 2006

Florida Department of State
Division of Corporations

To Whom It May Concern:

This letter is in response to your "Notice of intent to dissolve". Since February 15, 2006, we sent to you the annual report filing form with the check # 2019.

Attach we are sending a copy of that annual report filing form and a new check # 1000

We will appreciate your attention to this matter.

Sincerely



Vivianka Lavin
Ola Group, Inc.