

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000025526

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: AXIS 1421,INC

**Current Principal Place of Business:**

17600 COLLINS AVENUE  
SUNNY ISLES, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

17600 COLLINS AVENUE  
SUNNY ISLES, FL 33160

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROBAYNA, MARIA  
17600 COLLINS AVENUE  
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:                      P                      ( ) Delete  
Name:                      GARCIA ASCANIO, ANABELL  
Address:                      17600 COLLINS AVENUE  
City-St-Zip:                      SUNNY ISLES, FL 33160

Title:                      VP                      ( ) Delete  
Name:                      HERNANDEZ GARCIA, JAVIER  
Address:                      17600 COLLINS AVENUE  
City-St-Zip:                      SUNNY ISLES, FL 33160

Title:                      S                      ( ) Delete  
Name:                      HERNANDEZ GARCIA, GRAZIELLA  
Address:                      17600 COLLINS AVENUE  
City-St-Zip:                      SUNNY ISLES, FL 33160

Title:                      S                      ( ) Delete  
Name:                      HERNANDEZ GARCIA, ANAKARINA  
Address:                      17600 COLLINS AVENUE  
City-St-Zip:                      SUNNY ISLES, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: GARCIA ASCANIO ANABELL

P

04/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date