


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000038408**  
 1. Entity Name  
**LA REVOLTOSA, INC.**



Principal Place of Business      Mailing Address  
**10470 S.W. 96TH STREET**      **10470 S.W. 96TH STREET**  
**MIAMI, FL 33176**      **MIAMI, FL 33176**

**DO NOT WRITE IN THIS SPACE**



03292006    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
**65-0666372**      Not Applicable

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

6. Name and Address of Current Registered Agent  
**PARDO, MILAGROS**  
**10470 S.W. 96TH STREET**  
**MIAMI, FL 33176**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

**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 NAME STREET ADDRESS CITY-ST-ZIP	D PARDO, MILAGROS 10470 S.W. 96TH ST. MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FRANCISCO, PAEDO 10470 SW 96 ST MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PARDO, DAVID 10470 SW 96 ST MIAMI, FL 33176
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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: *Milagros Pardo*      3/31/06    305-551-7707  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #