APPROVED AND FILED

06 MAY 15 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000081738

1. Entity Name
MARNES TEQUESTA, INC.

Principal Place of Business	Mailing Address
801 BRICKELL AVE., SUITE 2380 MIAMI, FL 33131	801 BRICKELL AVE., SUITE 2380 MIAMI, FL 33131

04282006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
445 GERONA AVE	445 GERONA AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CORAL GABLES FL	City & State: CORAL GABLES FL
Zip: 33146 Country	Zip: 33146 Country

4. FEI Number: 65-1135201 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TTK SERVICE LLC 801 BRICKELL AVE., SUITE 2380 MIAMI, FL 33131	Name: RAFAEL J. SANCHEZ-ABALI PA Street Address (P.O. Box Number is Not Acceptable) 445 GERONA AVE City: CORAL GABLES FL Zip Code: 33146

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: RAFAEL SANCHEZ-ABALI President 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD EIJO, NESTOR E 801 BRICKELL AVE., SUITE 2380 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 445 GERONA AVE CORAL GABLES FL 33146
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VPD EIJO, MARIA ANGELICA 801 BRICKELL AVE., SUITE 2380 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☒ Change ☐ Addition 445 GERONA AVE CORAL GABLES FL 33146
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 800075471798 05/30/06--01004--025 **2225.00
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: RAFAEL SANCHEZ-ABALI Attorney in Fact 4.26.06 305.779.5041
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #