

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90220 024 ***150.00

60033253



04232006 Chg-P CR2E034 (11/05)

4. FEI Number
59-1582677

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SUAREZ, JORGE L
10125 SW 72 AVE
MIAMI, FL 33156

7. Name and Address of New Registered Agent

Name MIGUEL A. SUAREZ
Street Address (P.O. Box Number is Not Acceptable)
10125 SW 72 AVE
City MIAMI FL Zip Code 33156

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]

MIGUEL A. SUAREZ

4/24/06

(Signature is 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

TITLE	P	<input type="checkbox"/> Delete
NAME	SUAREZ, YOLANDA	
STREET ADDRESS	10125 SW 72 AVE	
CITY - ST - ZIP	MIAMI, FL 33156	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	SUAREZ, JORGE L	
STREET ADDRESS	10125 SW 72 AVE	
CITY - ST - ZIP	MIAMI, FL 33156	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	SUAREZ, YOLI A	
STREET ADDRESS	10125 SW 72 AVE	
CITY - ST - ZIP	MIAMI, FL 33156	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SUAREZ, MIGUEL A.	
STREET ADDRESS	10125 SW 72 AVE	
CITY - ST - ZIP	MIAMI, FL 33156	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SUAREZ, MIGUEL A.	
STREET ADDRESS	10125 SW 72 AVE	
CITY - ST - ZIP	MIAMI, FL 33156	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

[Signature]
Sec. / Treas.
MIGUEL A. SUAREZ

4/23/06 (305) 606-0028

Date

Daytime Phone #