

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 22, 2006 8:00 am
Secretary of State

05-22-2006 90048 026 ***150.00

DOCUMENT # 387330

1. Entity Name
ALMERIA INTERNATIONAL CONSTRUCTION CO.



Principal Place of Business
**201 SEVILLA AVENUE, SUITE 301
CORAL GABLES, FL 33134**

Mailing Address
**201 SEVILLA AVENUE, SUITE 301
CORAL GABLES, FL 33134**

DO NOT WRITE IN THIS SPACE



01242006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1360909

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PAGES, MARIO A
201 SEVILLA AVENUE
SUITE 301
CORAL GABLES, FL 33134**

**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, 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	V
NAME	CARVAJAL, LEONARDO
STREET ADDRESS	201 SEVILLA AVENUE
CITY-ST-ZIP	CORAL GABLES, FL
TITLE	P
NAME	PAGES, MARIO A
STREET ADDRESS	201 SEVILLA AVENUE, SUITE 301
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	Treasurer
NAME	PAGES, ROBERTO
STREET ADDRESS	201 Sevilla Avenue #301 Coral Gables
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Mario A. Pages P:

4-28-06

305-4438665