## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 440987** 

FILED Jun 23, 2006 Secretary of State

Entity Name: E.P. "SUPE" GAULDING'S IMPORT AND EXPORT CORPORATION OF MIAM

|   | L.I . 001 L 0  | AOLDINO S IIVII ONT AN                                      | ID EXPORT CORPORATIO                            | N OF WILAWII                                 |  |
|---|--|---|---|--|--|
| Current Principal Place of Business:  |  |   | New Principal P                                 | New Principal Place of Business:             |  |
| 8180 NW 16 S`<br>SUITE 100<br>MIAMI, FL 331   |  |   |   |  |  |
| Current Mailing Address:  |  |   | New Mailing Add                                 | New Mailing Address:                         |  |
| 131MADEIRA A<br>SUITE 2000<br>CORAL GALBE   |  | US  |   |  |  |
| FEI Number: 59-1  | 1515917 FE   | Number Applied For()  | FEI Number Not Applicable (                     | ) Certificate of Status Desired ( )          |  |
| Name and Add  | dress of Curre   | nt Registered Agent:  | Name and Addre                                  | ess of New Registered Agent:                 |  |
| GABLES REGISTERED AGENTS CORPORATION<br>131 MADEIRA AVENUE<br>SUITE 2000<br>CORAL GABLES, FL 33134 US |  |   | GABLES REGIST<br>131 MADEIRA AV<br>CORAL GABLES |  |  |
| The above nam<br>in the State of F  | ned entity subm<br>Florida.  | its this statement for the p                                | ourpose of changing its regis                   | stered office or registered agent, or both,  |  |
| SIGNATURE: MANUEL E. CABEZA   |  |   |   | 06/23/2006                                   |  |
| •   | Electronic Si  | gnature of Registered Age                                   | ent   | Date   |  |
|   |  | ), F.S., the corporation did no<br>t Fund Contribution ( ). | ot receive the prior notice.                    |  |  |
| OFFICERS AND DIRECTORS:   |  |   | ADDITIONS/CHA                                   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Address: 131  | ST () Delet<br>ULDING, ELLISON<br>1 MADEIRA AVENU<br>PRAL GABLES, FL | I<br>JE   | Title:<br>Name:<br>Address:<br>City-St-Zip:     | ()Change ()Addition                          |  |
| Address: PR   | DRIGUEZ, ÓDALI   |   | Title: Name: CAL Address: City-St-Zip:          | () Change () Addition                        |  |

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: E. P. GAULDING P 06/23/2006