

2006 FOR PROFIT CORPORATION ANNUAL REPORT

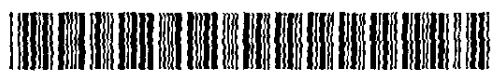
FILED
Mar 30, 2006 08:00 AM
Secretary of State

DOCUMENT # 594363
 1. Entity Name
DE LA VEGA ENTERPRISES, INC.



Principal Place of Business Mailing Address
 10304 SW 134 CT 10304 SW 134 CT
 MIAMI, FL 33186 US MIAMI, FL 33186 US

DO NOT WRITE IN THIS SPACE



03222008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 59-1880161 Not Applicable

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

6. Name and Address of Current Registered Agent
 DE LA VEGA, OSVALDO
 10304 SW 134 CT
 MIAMI, FL 33186

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

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	PD
NAME	DE LA VEGA, OSVALDO
STREET ADDRESS	10304 SW 134 CT
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	SD
NAME	DE LA VEGA, ROSENDA
STREET ADDRESS	10304 SW 134 CT
CITY-ST-ZIP	MIAMI, FL 33186
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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 04/13/06-80030-020 150.00

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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: Osvaldo Vega De la Vega Date: 3-27-06 Daytime Phone #: 305-989-9095
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR