## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED DOCUMENT # F05000000102 06 SEP 11 PH 3: 39 MADELUX INTERNATIONAL, INC. CORETARY OF STATE Principal Place of Business Mailing Address 3006 AVIATION AVE., STE. 3-C 3006 AVIATION AVE., STE. 3-C COCONUT GROVE, FL 33133 COCONUT GROVE, FL 33133 07252006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 66-0530280 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JORDAN, ENRIQUE A DO NOT WRITE 14665 OLD CUTLER ROAD MIAMI, FL 33158 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) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS 10. TITLE 105/06 90153 038 \$150.00 JORDAN, ENRIQUE A NAME STREET ADDRESS 3006 AVIATION AVE., STE, 3-C CITY-ST-ZIP COCONUT GROVE, FL 33133 **VPVC** TITLE REVAI, TOMI NAME STREET ADDRESS 3006 AVIATION AVE., STE. 3-C CITY-ST-ZIP COCONUT GROVE, FL 33133 TITLE REVAI, JOSEPH NAMÉ STREET ADDRESS 3006 AVIATION AVE., STE. 3-C DO NOT WRITE CITY-ST-ZIP COCONUT GROVE, FL 33133 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 received 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 all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Døytime F

Date

Page 182

209/11



3006 AVIATION AVE., SUITE 3C • COCONUT GROVE, MIAMI, FL 33133 PHONE: (305) 859-8737 • FAX: (305) 859-2812 • E-MAIL: Woodmrkt@bellsouth.net

Friday, September 08, 2006

## **DIVISION OF CORPORATION**

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **RE: DOCUMENT # F05000000102**

Dear Sirs,

On March 24th, 2006 we filed above referenced document along with fee.

As per conversation with one of your operators today, we were informed that in April a rejection letter requesting corrections was sent to us. Such letter was never received by in our offices.

Enclosed please find new downloaded form signed, we are kindly requesting you to waive any penalty fees we may have incurred in.

Thank you in advance,

**ENRIQUE A. JORDAN** 

President