## 2006 FOR PROFIT CORPORATION ANNUAL REPORT.

## DOCUMENT # F05000003975

1. Entity Name

ANTIGUA LANDINGS CORPORATION S.A.



FILED Apr 20, 2006 08:00 AN Secretary of State

Principal Place of Business 11811 NORTH FREEWAY 300 HOUSTON, TX 77060 Mailing Address

11811 NORTH FREEWAY 300 HOUSTON, TX 77060



DO NOT WRITE IN THIS SPACE

04052006 No Chg-P CR2E034 (11/05)

4. FEI Number 86-1138519 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TANGMAN, GORDON 7821 NORTH DALE MABRY SUITE 110 TAMPA, FL 33614

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the prions of registered agent.	surpose of changing its registered	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and acce
SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registered	Acent signature	required when reinstating)	DATE
	E NOWI!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	*	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP RUSCA, FAUSTO VIA MAGGIO 1 6900 LUGANO, SWITZERLAND,				05/02/06-8009i-016 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP TRUJICCO, CESAR ANTONIO PO BOX 823-2446 PANAMA REP. DE PANAMA,		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GIANELLA, LUSIA VIA MAGGIO 1 6900 LUGANO, SWITZERLAND,				
TITLE NAME STREET ADDRESS CITY-SI-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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