2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2006 08:00 AN Secretary of State

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DOCUMENT # F7987 1. Entity Name DOWNING'S IMPORT AND E		
Principal Place of Business 12005 S.W. 94TH TERRACE MIAMI, FL 33186	Mailing Address 12005 S.W. 94TH TERRACE MIAMI, FL 33186	

			Sept.				
Principal Place 12005 S.W. MIAMI, FL 3	94TH TERRACE	Mailing Address 12005 S.W. 94TH TERRACE MIAMI, FL 33186					MINTER REMINERS IS IN A
DO NOT WRITE IN THIS SPACE		CE	04202006 4. FEI Number 59-2210		CR2E034 (1		
DOWNING, MARTHA 12005 S.W. 94 TERR. MIAMI, FL 33186			DO NOT WRITE IN THIS SPACE				
8. The above the obligat SIGNATURE	named entity submits this statement for the tions of registered agent. Signature, typed or printed name of registered agent and to	n n k 2 - e - e - e - e - e - e - e - e - e -	ed office or regist d Agent signature requir		n, in the State of Flo	orida. I am famili DATE	ar with, and accept
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		5.00 May Be ided to Fees			
10.	OFFICERS AND DIR	ECTORS				 -	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST DOWNING, MARTHA 12005 S.W. 94TH TERRACE MIAMI, FL 33186	2010110				100053888 106-80075	6 -019 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-	-			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12 I hereby r	certify that the information supplied with this	fillion door out quality for the out	amplione contain	ad in Charter 440	Manda Cara a - f		

recept ceruly that the information supplied with this filling 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 eath; 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 ON DIRECTOR