

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G13647

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: EVERLASTING RAIN SYSTEMS, INC.

## Current Principal Place of Business:

6065 NW 167TH STREET  
SUITE B-9  
MIAMI LAKES, FL 33015 US

## New Principal Place of Business:

## Current Mailing Address:

6065 NW 167TH STREET  
SUITE B-9  
MIAMI LAKES, FL 33015 US

## New Mailing Address:

FEI Number: 59-2251456      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MORERA, JUAN A  
16234 NW 82ND PLACE  
MIAMI LAKES, FL 33016 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MORERA, JUAN ALBERTO  
Address: 16234 NW 82ND PLACE  
City-St-Zip: HIALEAH, FL 33016

Title: V ( ) Delete  
Name: MORERA, JUSTO  
Address: 265 WEST 62 STREET  
City-St-Zip: HIALEAH, FL 33012

Title: ST ( ) Delete  
Name: MORERA, ROSENDA  
Address: 16234 NW 82ND PLACE  
City-St-Zip: HIALEAH, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUAN ALBERTO MORERA

PD

01/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date