

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 12, 2006 8:00 am**  
**Secretary of State**

06-12-2006 90004 027 \*\*\*158.75

40095324



06062006 Chg-P CR2E034 (11/05)

<b>DOCUMENT # G87309</b>					
1. Entity Name <b>MARCO DAROSA, INC.</b>					
Principal Place of Business <b>138 PRICE QUEST, P.O. BOX 1088 CHICOUTIMI QUEBEC G7H5G4 CANADA, XX</b>			Mailing Address <b>138 PRICE QUEST, P.O. BOX 1088 CHICOUTIMI QUEBEC G7H5G4 CANADA, XX</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>59-2375230</b>	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>BEHAR, LARRY J. 888 SE THIRD AVE., S.400 FORT LAUDERDALE, FL 33316</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 _____					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GINGRAS, MARCEL 138 PRICE QUEST, CP 1088 CHICOUTIMI, QUEBEC.	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	N/A <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: 			DATE: <b>JUNE 9/06</b> 418-543-0666		
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		

# ATTACHMENT



40095324

## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 6, 2006

MARCO DAROSA, INC.  
C/O MARCEL GINGRAS  
17050 N BAY RD, APT 1203  
SUNNY ISLES BEACH, FL 33160 US

SUBJECT: MARCO DAROSA, INC.  
Ref. Number: G87309

Pursuant to our telephone conversation of June 6, 2006, I am enclosing your 2006 annual report form.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Debra S Cooper  
Document Specialist

Letter Number: 306A00038984

*Enclosed please find my 2006 ANNUAL REPORT FORM...  
Together with my check in the amount of \$158.75 TO COVER  
the "FEE" and "Certificate of status", as per your letter dated  
June 6, 2005.*

*Regards,  
[Signature]*

*June 6/2006*