2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H53126

1. Entity Name IVOR BEARING INC.



Mar 02, 2006 08:00 AN Secretary of State

Fee Required

Daytime Phone #

FILED

Principal Place of Business 4455 E. 10TH AVE. HIALEAH, FL 33013-2515 Mailing Address 4455 E. 10TH AVE. HIALEAH, FL 33013-2515



DO NOT WRITE IN THIS SPACE

02232006 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 59-2523145 Not Applicable \$8,75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

ROJAS, HECTOR 4455 E. 10TH AVE. HIALEAH, FL 33013

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plans of registered agent.	iurposa of changing its reç	gistered office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and tifle	applicable (NOTE Re	sgistered Agent signature	required when reinstating)	ÓATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00		Election Campaign Financing \$5.00 May Be Trust Fund Contribution,			
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY ST ZIP	PD ROJAS, HECTOR 4455 E. 10TH AVE. HIALEAH, FL					
TITLE NAME STREET ADDRESS CITY+ST-ZIP	VD ROJAS, ŁUIS FERNANDO 4455 E. 10TH AVE. HIALEAH, FL				(/00000453907 03/14/06-80039-022 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROJAS, LEOPOLDO 4455 E. 10TH AVENUE HIALEAH, FL 33013		· · · · · · · · · · · · · · · · · · ·	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		•		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS GITY-ST-ZIP						
12. I hereby a indicated of the corchanged	certify that the information supplied with this f on this report or supplemental raport is true poration or the receiver or trystee empowere or on an attachment with an address with a	iling does not qualify for the and accurate and that my does to execute this report as I other like empowered.	he exemptions co signature shall hav required by Chap	ntained in Chapter 11s ve the same legal effecter 607, Florida Statute	9. Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if	

LEOPOldo Rojas.

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR