


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2006 08:00 AM
Secretary of State

DOCUMENT # J28876 1. Entity Name TUFTS GARFIELD CORPORATION	
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Principal Place of Business
**2100 SALZEDO ST
#300
CORAL GABLES, FL 33134**

Mailing Address
**2100 SALZEDO ST
#300
CORAL GABLES, FL 33134**



03202006 No Chg-P CRZE034 (11/05)

4. FEI Number 59-2495846	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ARAZOZA \$FERNANDEZ-FRAGA, P.A
2100 SALZEDO STREET
SUITE 300
CORAL GABLES, FL 33134**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

1100001479549
04/18/06-80008-003 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANCHEZ, FEDERICO F. 2100 SALZEDO ST CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANCHEZ, ELISA O. 2100 SALZEDO ST CORAL GABLES, FL 33134
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**DO NOT WRITE
IN THIS SPACE**

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: *Federico Sanchez* March 14, 2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #