

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90024 039 \*\*\*150.00

**DOCUMENT # J87267**

1. Entity Name

INVESTAMAR INTERNATIONAL, INC.



Principal Place of Business

8033 NW 36TH ST  
SUITE 440  
MIAMI SPRINGS, FL 33166

Mailing Address

8033 NW 36TH ST  
SUITE 440  
MIAMI SPRINGS, FL 33166

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01042006

Chg-P

CR2E034 (11/05)

4. FEI Number

59-2835588

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

ISICOFF & RAGATZ, P.A.  
1101 BRICKELL AVENUE  
SUITE 800 SOUTH TOWER  
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1200 BRICKELL AVENUE

SUITE 1900

City  
MIAMI

FL

Zip Code  
33131

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

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME RIBADENEIRA, DIEGO  
STREET ADDRESS 8033 NW 36TH ST #440  
CITY-ST-ZIP MIAMI SPRINGS, FL 33166

TITLE VPS ☐ Delete  
NAME RIBADENEIRA, DANIELA  
STREET ADDRESS 8033 NW 36TH ST #440  
CITY-ST-ZIP MIAMI SPRINGS, FL 33166

TITLE AS ☐ Delete  
NAME MENENDEZ, GEORGINA  
STREET ADDRESS 8033 NW 36TH ST #440  
CITY-ST-ZIP MIAMI SPRINGS, FL 33166

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Diego Ribadeneira

2/20/2006

(305) 597-9044

Date

Daytime Phone #