ີ 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 10, 2006 8:00 am Secretary of State

02-10-2006 90025 001 ***150.00

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1. Entity Name MALAGA MOTEL APARTMENT'S, INC.



Principal Place of Business

% ARTHUR R. GODAR 1721 SE 46 LANE CAPE CORAL, FL 33904 Mailing Address

% ARTHUR R. GODAR 1721 SE 46 LANE CAPE CORAL, FL 33904



01232006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0028687 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

GODAR, ARTHUR [®] R. 1225 LA FAUNCE WAY FORT MYERS, FL 33919		DO NOT WRITE IN THIS SPACE		
8. The above named entity submits this statement for the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and Signature.	utle if applicable. (NOTE: Registered Agent	ce or registered agent, or b	oth, in the State of Florida. I am familiar with, and accep	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
TITLE PD GODAR, ARTHUR R STREET ADDRESS 1225 LA FAUNCE WAY FORT MYERS, FL 33919 TITLE S NAME GODAR, PATRICIA STREET ADDRESS 1721 SE 40 LANE	ofnunce way			
TITLE HAME — STREET ADDRESS CITY-ST-ZIP		_	NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME				

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.

SÍGNATURE

STREET ADORESS CITY-ST-ZIP

ARTHUR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

YR R. GODAR O

3-06

239-936-8169

Daytime Phone #