## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K19400

FILED Apr 26, 2006 Secretary of State

Entity Name: EDUARDO ENSENAT SURVEYING INC.

ncipal Place of Business:  3 STREET A33166  illing Address:  3 STREET	New Principal Place	
A 33166 <b>iling Address:</b> 3 STREET	New Mailing Address	s:
STREET	New Mailing Address	<b>5:</b>
A 33166		
55-0059877 FEI Number Applied For (	) FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Address of Current Registered Ager	nt: Name and Address o	f New Registered Agent:
EDUARDO M. I PL L 33010 US		
named entity submits this statement for of Florida.	the purpose of changing its registered	d office or registered agent, or both,
≣: <u></u>		
Electronic Signature of Registere	d Agent	Date
paign Financing Trust Fund Contribution ( )	•	
AND DIRECTORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTORS
PD () Delete ENSENAT, EDUARDO M., 700 E. 15TH PL HIALEAH, FL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
VD ( ) Delete ENSENAT, MARIA C., 700 E. 15TH PL HIALEAH, FL	Title: Name: Address: City-St-Zip:	() Change () Addition
T () Delete	Title:	( ) Change ( ) Addition
	Address of Current Registered Ager EDUARDO M. I PL L 33010 US  mamed entity submits this statement for of Florida.  Electronic Signature of Registered Paign Financing Trust Fund Contribution ( )  AND DIRECTORS:  PD ( ) Delete ENSENAT, EDUARDO M., 700 E. 15TH PL HIALEAH, FL  VD ( ) Delete ENSENAT, MARIA C., 700 E. 15TH PL	Address of Current Registered Agent:  EDUARDO M. I PL L 33010 US  mamed entity submits this statement for the purpose of changing its registered of Florida.  E:  Electronic Signature of Registered Agent  paign Financing Trust Fund Contribution ( ).  AND DIRECTORS:  ADDITIONS/CHANGE  PD ( ) Delete ENSENAT, EDUARDO M., 700 E. 15TH PL HIALEAH, FL  VD ( ) Delete ENSENAT, MARIA C., 700 E. 15TH PL Address:  VD ( ) Delete ENSENAT, MARIA C., 700 E. 15TH PL Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA C ENSENAT VP 04/26/2006