## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: ≤

## Mar 02, 2006 08:00 Al DOCUMENT #K19662 **Secretary of State** ACRI SERVICES CORP. Principal Place of Business Mailing Address 8470 SW 45TH ST 8470 SW 45TH ST MIAMI, FL 33155 MIAMI, FL 33155 CR2E034 (11/05) 02262006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0045352 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CASANOVA, ANGEL DO NOT WRITE 8470 SW 45 ST MIAMI, FL 33155 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE CASANOVA, ANGEL NAME STREET ADDRESS 8470 SW 45 ST CITY-ST-ZIP MIAMI, FL 33155 UDM000454052 TITLE 03/14/06-80046-012 150.00 GARCIA, LAZARO STREET ADDRESS 6472 SW 39TH TERR. CITY-ST-ZIP MIAMI, FL mŒ NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TIILE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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

**FILED**