## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 08, 2006 08:00 AM

| DOCUMENT # K50024  1. Entity Name MANORA INVESTMENT CORPORATION                         |   |   |   | Secretary of State |                          |                      |                                       |
|---|---|---|---|--------------------|--------------------------|----------------------|---------------------------------------|
| Principal Place<br>1305 SW 30<br>MIAMI, FL 3  |   | Mailing Address<br>C/O IVAN A. GOMEZ, ESQ.<br>601 BRICKELL KEY DR. #507<br>MIAMI, FL 33131 US |   |                    |                          |                      |                                       |
| C   | OO NOT WRITE  | 01252006 No Chg-P CR2E034 (11/05)  4. FEI Number  |   |                    |                          |                      |                                       |
| <u> </u>  | 6. Name and Address of Current Re   | gistered Agent  |   |                    |                          |                      |                                       |
| IAG CORPORATE SERVICES, INC.<br>601 BRICKELL KEY DRIVE<br>SUITE 507<br>MIAMI, FL. 33131 |   |   |   | IN T               | NOT W<br>THIS SP         | ACE                  |                                       |
| 8. The above<br>the obligat<br>SIGNATURE  | e named entity submits this statement for the<br>tions of registered agent.  Signeture, typed or printed name of registered agent and |   | ed Office or registër<br>d Agent signature required |                    | th, in the State of Flor | ida. I am familiar v | ith, and accept                       |
|   | E NOW!!! FEE IS \$150.00<br>ay 1, 2006 Fee will be \$550.00   | 9. Election Campaign Finan Trust Fund Contribution.   | ofng _ \$5.   | 00 May Be          |                          |                      | · · · · · · · · · · · · · · · · · · · |
| 10.   | OFFICERS AND DIF  | RÉCTORS   |   |                    | UODDOO                   | 425338               | - <u></u>                             |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | PD<br>CIMADEVILLA, MANUEL<br>1305 S.W. 30TH AVE.<br>MIAMI, FL   |   |   |                    | 02/18706-                | 425338<br>80092-014  | 158.75                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | STD<br>CIMADEVILLA, DIGNORA<br>1305 S.W. 30TH AVE.<br>MIAMI, FL   |   |   |                    |                          |                      |                                       |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   |   |   | DO                 | NOT W                    | RITE                 |                                       |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   |   | -   |                    | THIS SP                  | ÁCE                  |                                       |
| TITLE NAME STREET ADDRESS   |   |   |   |                    |                          |                      |                                       |

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

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Manuel Cimadevilla President signature and typed or printed name of signing officer or director