

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2006 8:00 am
Secretary of State

02-21-2006 90024 020 ***150.00

DOCUMENT # K80117	
1. Entity Name ANA ADVERTISING, INC.	

Principal Place of Business 8051 NW 36 ST 603 MIAMI, FL 33148	New Address Ana Advertising 5045 NW 36th St. Suite 504 City of Doral, FL 33168	Mailing Address P O BOX 650002 P. O. BOX 650002 MIAMI, FL 33265 US
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DO NOT WRITE IN THIS SPACE



02082006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0112325	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DE LOS RIOS, AUGUSTO 8000 SW 149 AVE SUITE A-211 MIAMI, FL 33193
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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.

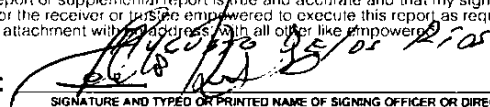
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when re-registering)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DE LOS RIOS, AUGUSTO 8000 S.W. 149TH AVE A211 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DE LOS RIOS, TATIANA 8000 S.W. 149TH AVE A211 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT DE LOS RIOS, ERICA 8000 S.W. 149TH AVE A211 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS AHUMADA, MARTHA P. 8000 S.W. 149TH AVE A211 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE LOS RIOS, SANDRA 8000 SW 149TH AVE., A211 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE LOS RIOS, CRISTINA 8000 SW 149TH AVE., A211 MIAMI, FL

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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 addresses with all other like empowered.

SIGNATURE: 	2/9/06 Date	305-477-675 Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		