PROFIT CORPORATION NUMBER REPORT

L19671

CARONI, P.A.



FILED Jan 23, 2006 08:00 AM Secretary of State

METAT. CARONI MARIPOSA AVENUE LEGABLES, FL 33146 Mailing Address

% CECILIA T. CARONI 1039 MARIPOSA AVENUE CORAL GABLES, FL 33146



01072006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0149479 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

TONI, CECILIA T. TMARIPOSA AVENUE TAL GABLES, FL 33146

DO NOT WRITE IN THIS SPACE

shove named entity submits this statement for the	fou too	e of changing its registered office or registered agent, or both, in the State of Florida.	am familiar with, and accept
TOBIIgations of registered agent.		. 2	
robilderious di legistered agent.		` 	

Storabue: typed or printed name of registered agent and title it explicable

(NOTE, Registered Agent algorithms required when reinstating)

DATE

FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

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OFFICERS AND DIRECTORS								
DURESS -DP	D CARONI, CECILIA T. 1039 MARIPOSA AVE CORAL GABLES, FL	! ! ! !						
DDAESS DP								
PARCES.		;						

DO NOT WRITE IN THIS SPACE

Thereby 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 single and that my signature shall have the same legal effect as it made under oath, that I am an officer or director 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 it is an an officer or the corporation or on an attachment with an address, with all either like empowered.

GNATURE:

ADDRESS

TADD9ESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

resident

Daytima Phone #