- 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # L56863

1. Entity Name ANABAR ENTERPRISES, INC.



Principal Place of Business

10107 SUNSET DRIVE MIAMI, FL 33173

Mailing Address

10107 SUNSET DRIVE MIAMI, FL 33173



04232007	No Chg-P	CR2E034 (11/05)

4. FEI Number Applied For 65-0248599 Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

MORA, ANA M 10107 SUNSET DRIVE MIAMI, FL 33173

DO NOT WRITE IN THIS SPACE

			,	
	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_				
	Signature, typed or printed name of registered agent and little i	fapplicable (NOTE Registere	d Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	scing \$5.00 May Be Added to Fees	000000729965 05/08/07-80060-014 150.00
10.	OFFICERS AND DIREC	TORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORA, ANA MARIA 10107 SUNSET DRIVE MIAMI, FL 33173			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD ALEMAN, BARBARA M 10107 SUNSET DRIVE MIAMI, FL 33173		i i i i i i i i i i i i i i i i i i i	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME Street Address City-S3-Zip	\wedge			
of the cor		nd accurate and that my signat I to execute this report as requir		Florida Statutes. I further certify that the information at as if made under oath; that I am an officer or director is; and that my name appears in Block 10 or Block 11 if

SIGNATURE:	04/2	6/07
SIGNATURE AND THE ON PROFES NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytima Phone #