... 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L71266

1. Entity Name
TAMPA ENVIOS, INC.

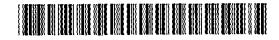


FILED Mar 20, 2006 08:00 AM Secretary of State

Principal Place of Business

2919 W. COLUMBUS DRIVE TAMPA, FL 33607 US Mailing Address

2919 W. COLUMBUS DRIVE TAMPA, FL 33607 US



02152006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0192624 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

RAMIREZ, ARMANDO 2919 W. COLUMBUS DRIVE TAMPA, FL 33607

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the prons of registered agent.	urpose of changing its registered of	office or re	egistered agent, or bo	ith, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and fills if	applicable (NOTE, Registered Ag	ent signature	required when reinstating)	OATE
	ogrados, types a printar name o regionare agent con the		•		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			
10.	OFFICERS AND DIRECTORS				
NAME STREET ADDRESS CKY-SI-ZIP	P RAMIREZ, ARMANDO 2919 W COLUMBUS DR TAMPA, FL 33607				U00000474313 04/04/06-80019-010 150.00
TITLE HAME STREET ADDRESS CITY-ST-ZIP	VP RAMIREZ, ANA 19002 AVE. BAYONNES LUTZ, FL 33549				
TITLE NAME STREET ADDRESS GITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET AGORESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

12. Thereby 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-optrustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 is changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

20800

813-873-0533