FILED
Jul 31, 2006 8:00 am
Secretary of State
07-31-2006 90002 022 ***158.75

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L81723

1. Entity Name
M. V. TONY, INC.

50023379

Principal Place of Business	Mailing Address
% ORESTES ESTRADA ~~10111 SW 142 STREET~~ ~~MIAMI, FL 33176~~	% ORESTES ESTRADA ~~10111 SW 142 STREET~~ ~~MIAMI, FL 33176~~
2. Principal Place of Business: 10825 SW 112 AVE	3. Mailing Address: 10825 SW 112 AVE.
Suite, Apt. #, etc.: #304	Suite, Apt. #, etc.: #304
City & State: miami, Fl.	City & State: miami, Fl.
Zip: 33176 Country:	Zip: 33176 Country:

07172006 Chg-P CR2E034 (11/05)

4. FEI Number: 65-0206085 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ESTRADA, ORESTES % ORESTES ESTRADA ~~10111 SW 142 STREET~~ ~~MIAMI, FL 33176~~	Name: Street Address (P.O. Box Number is Not Acceptable): 10825 SW 112 AVE. #304 City: Miami FL Zip Code: 33176

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 reinstating) DATE

FILE NOW!!! FEE IS $150.00 Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ESTRADA, ORESTES ~~10111 SW 142 STREET~~ ~~MIAMI, FL 33176~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: 10825 SW 112 AVE #304 miami, Fl. 33176	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ESTRADA, DALIA ~~10111 SW 142 STREET~~ ~~MIAMI, FL 33176~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: 10825 SW 112 AVE #304 miami Fl. 33176	☒ Change ☐ Addition
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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 an address, with all other like empowered.

SIGNATURE: Orestes Estrada 7/17/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #