2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

May 16, 2006 8:00 am Secretary of State DOCUMENT # M03901 1. Entity Name 04-24-2006 90424 009 ***150.00 **BENJI CORPORATION** Principal Place of Business Mailing Address 4218 S.W. 9 STREET MIAMI FL 33134 4218 S.W. 9 STREET MIAMI FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GONZALEZARANGO, MERCEDES 4218 SW 9TH ST Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33134-City Zip Code 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. (NOTE: Registered Agent signature reduced when revisiblely) FILE NOW!!! FEE IS \$150.00-9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Cetete TITLE Addition GONZALEZARANGO, MERCEDES MALE NAME STREET ADDRESS 4218 S.W. 9 STREET STREET ADDRESS MIAMI FL CHY-ST-ZP CITY-ST-ZIP MILE ☐ Delete ☐ Change ☐ Addition GONZALEZ, CHARLES A. NAME NAME STREET ADDRESS 4218 S.W. 9 STREET STREET ADDRESS CITY-ST-7P CITY-ST-219 MIAMI FL FILE ΤD ☐ Delete HILE ☐ Change Addition NAME GONZALEZ, JOHN A. NAME STREET ADDRESS STREET ADDRESS 4218 S.W. 9 STREET CITY-ST-ZIP CITY-ST-ZIP MIAM! FL TILE ☐ Delete TITLE ☐ Change ☐ Addition MALKE HAME STREET ADDRESS STRECT ADDRESS CITY-ST-ZIP CITY-S1-7/P IIILE ☐ Delete ☐ Channe ■ Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP HILE ☐ Defete Addition DILE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP 12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 1.19, 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 attochment with an address, with all other like empowered. SIGNATURE: __

FILED

1. Entity Name BENJI CORPORATION			ATTACHMENT
Principal Place of Business	Mailing Address		ATTACHMENT 66016647
4218 S.W. 9 STREET MIAMI FL 33134	4218 S.W. 9 STREET MIAMI FL 33134		60010047
2. Principal Place of Business	3. Mailing Address		The state of the s
Suite, Apt. #, etc.	Suite, Apt. #, etc.		1st MOORE CR2E034 (10/05)
City & State	City & State	·····	4. FEI Number NO-T APPLICABLE Applied For Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desired See Required Fee Required
6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
GONZALEZARANGO, MERCED 4218 SW 9TH ST MIAMI FL 33134	ES _.	Name Street Address	: (P.O. Box Number is Not Acceptable)
		City	FL Zip Code
8. The above named entity submits this statement for the obligations of registered agent. SIGNATURE Signature. Typed or printed name of registered agent. FILE NOW!!! FEE IS \$150.00.		registered office or regist	erod agent, or both, in the State of Florida. 1 am familiar with, and accept ded when remistating)
After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department o			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
10. OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME GONZALEZARANGO, MERCEDES STREET ADDRESS CITY-ST-ZIP MIAMI FL	☐ Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE SD NAME GONZALEZ, CHARLES A. STREET ADDRESS CITY-ST-ZIP MIAMI FL	· Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addilion
TITLE TD MAME GONZALEZ, JOHN A. STREET ADDRESS CITY-ST-ZIP MIAMI FL TD GONZALEZ, JOHN A. 4218 S.W. 9 STREET MIAMI FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
indicated on this report or supplemental report	s true and accurate and that powered to execute this repo	my signature shall have th ort as required by Chapter	ned in Section 119, Florida Statutes. I further certily that the information the same legal effect as if made under oath, that I am an officer or director 607, Florida Statutes, and that my name appears in Block 10 or Block 11

	MERCEDES GONZALEZ ARANGO OR 04-05 IOHN A. GONZALEZ OR 1223
-	CHARLES A CONTALE?
	4218 S.W. 97H ST. MIAMI, FL 33134-2622 Date 4/6/0 C 63-4/630 H
	Pay to the fonda Departmet of State \$ 150.00
	Del Sue Sue Setty DO 100 Dollars A
1	Bank of America Advantage®
	ACH R/T 083100277
	For MO 3901 MS acaugo "
	GUAÇONS SAFETY GLIF DEB