


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # M18966
 1. Entity Name
GRANADA PREMIUM FINANCE COMPANY



Principal Place of Business Mailing Address
4075 SW 83 AVE. **4075 SW 83 AVE.**
MIAMI, FL 33155-0710 **MIAMI, FL 33155-0710**

DO NOT WRITE IN THIS SPACE



04242006 No Chg-P CR2E034 (11/05)

4. FCI Number
59-2561335

Approved For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
DIAZ-PADRON, JUAN
4075 SW 83 AVE
MIAMI, FL 33155

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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 of the individual designated as registered agent FCI Number of Agent Date of Filing

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	SD DIAZ-PADRON, CARMEN 1410 ROBBIA AVE CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	D DIAZ-PADRON, JUAN 1528 CANTORIA AVE. CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	DP DESIATO, MICHAEL A 1410 ROBBIA AVE MIAMI, FL 33146
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

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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 a other like empowered.

SIGNATURE:  **Michael Desiato** 4-24-06 3-5-554-0353

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR