

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006 8:00 am
Secretary of State

01-10-2006 90022 040 ***150.00

DOCUMENT # M20601 1. Entity Name GEORGES BARHEL CORP.					
Principal Place of Business 9301 NE 6AVE MIAMI, FL 33138 US				Mailing Address 9301 NE 6AVE MIAMI, FL 33138 US	
2. Principal Place of Business 9301 NE 6 AVE Suite, Apt. #, etc. #C307		3. Mailing Address 9301 NE 6 AVE Suite, Apt. #, etc. #C307			
City & State MIAMI SHORES, FLORIDA Zip 33138		City & State MIAMI SHORES, FLORIDA Zip 33138		4. FEI Number 59-2598819	
Country USA		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SERRANO, ESTEBAN 40175 COLLINS AVE APT #204 BAL HBR, FL 33154				7. Name and Address of New Registered Agent Name SERRANO ESTEBAN Street Address (P.O. Box Number is Not Acceptable) 1290 NE 101 ST City MIAMI SHORES FL Zip Code 33138	
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  ESTEBAN SERRANO VP. DATE 1/06/06 (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VALDIVIESO, OLGA 1055 COLLINS AVE #903 BAL HARBOR, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SERRANO, ESTEBAN 40175 COLLINS AVE 204 BAL HBR, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SERRANO, JUAN 5851 N. BAYSHORE DRIVE MIAMI, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
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:  ESTEBAN SERRANO V.P. DATE 1/06/06 DAYTIME PHONE # 305 759-5400 (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)					