


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2006 08:00 AM
Secretary of State

DOCUMENT # M39716

1. Entity Name
PEDRO BELTRAN-ROJAS, INC.



Principal Place of Business 14944 SW 33RD STREET FORT LAUDERDALE, FL 33331 US	Mailing Address 14944 SW 33RD STREET FORT LAUDERDALE, FL 33331 US
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01072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2746040	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BELTRAN, PEDRO E
 14944 SW 33RD STREET
 FORT LAUDERDALE, FL 33331**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE P	BELTRAN, PEDRO 14944 SW 33RD STREET FORT LAUDERDALE, FL 33331
TITLE VPS	FERNANDEZ, MERCEDES 14944 SW 33RD STREET FORT LAUDERDALE, FL 33331
TITLE NAME	
TITLE NAME	
TITLE NAME	
TITLE NAME	

000000380327
 01/11/06-80009-016 158.75

DO NOT WRITE IN THIS SPACE

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: [Signature] **01-09-06 (924)423-1679**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #