


2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # M42939

1. Entity Name
SELECTA MAGAZINE INC.



\$158.75

Principal Place of Business Mailing Address

232 ANDALUSIA AVE, SUITE 200 **232 ANDALUSIA AVE, SUITE 200**
MIAMI, FL 33134 **MIAMI, FL 33134**



01172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
59-2763306 Not Applicable

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

6. Name and Address of Current Registered Agent

RAJOY, LILLIAM
300 ARAGON AVE #305
CORLA GABLES, FL 33134

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, 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	PSD BULNES, NORA 1717 N BAYSHORE DR #1432 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPDT RODRIGUEZ, AVELINA 1717 N. BAYSHORE DR. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BULNES, MICHAEL 1717 N. BAYSHORE DR. MIAMI, FL 33132
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

100000460995
 03/20/06 80032-013 158.75

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]* Vice Pres Date: *1-17-06* Daytime Phone #: *305 446-3305*