2006 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # M47231 1. Entity Name WATLING INVESTMENTS INC.

FILED Jan 31, 2006 08:00 AN **Secretary of State**



Principal Place of Business

Mailing Address

3350 S.W. 129 AVENUE MIAMI, FL 33175 US 3350 S.W. 129 AVENUE MIAMI, FL 33175



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01252006 No Cha-P CR2E034 (11/05)

4. FEI Number Applied For 65-0012664 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

ANLLO, CARLOS 3350 SW 129 AVE MIAMI, FL 33175

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The above named entity submits this statement for the obligations of registered agent.	the purpose of ch	anging its registered office	or registered agent, or both	in the State of Florida.	l am familiar with, a	nd accep
SIGNATURE Signature, typed or printed name of registered agent	and title II applicable	NOTE Registered Agent sign	ature required when reinstaling)	· · · · · c	ATE	 . ,
				11000004094	490	

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

Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

02/08/06-80101-013 150.0n

OFFICERS AND DIRECTORS 10. D TITLE ANLLO, CARLOS NAME STREET ADDRESS 3350 SW 129 AVE CITY-ST-ZIP MIAMI, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 of 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.

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NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARLOS ANLLO

1/26/06 Date

(305) 812-0052,

Daytime Phone #