

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M69193

FILED
Jan 18, 2006
Secretary of State

Entity Name: ANATUR CORPORATION

Current Principal Place of Business:

5757 COLLINS AVE, UNIT 1204
MIAMI, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

C/O NEWTON GORFINKEL
20818 W DIXIE HIGHWAY
AVENTURA, FL 33180

New Mailing Address:

C/O NESTER GORFINKEL
20818 W DIXIE HIGHWAY
AVENTURA, FL 33180

FEI Number: 65-0061239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORFINKEL, NESTON
20818 W DIXIE HIGHWAY
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BENHAMRON, LEON,
Address: 5757 COLLINS AVE #1204
City-St-Zip: MIAMI BEACH, FL 33140

Title: DST () Delete
Name: BENHAMRON, REYNA,
Address: 5757 COLLINS AVE #1204
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BENHAMRON, LEON

PRES

01/18/2006

Electronic Signature of Signing Officer or Director

Date