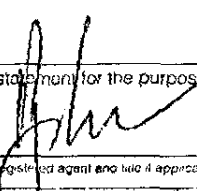
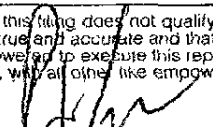


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # M92333 1. Entity Name TUNJOS TRADING COMPANY, INC.					
Principal Place of Business 610 NW 183RD ST SUITE 201 MIAMI FL 33169 US			Mailing Address P.O. BOX 1183 OPA LOCKA FL 33054		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 65-0064919	
5. Certificate of Status Desired ☒				Applied For Not Applicable	
6. Name and Address of Current Registered Agent JOSHUA, PATIENCE O. 3310 NW 178TH ST MIAMI FL 33056				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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  DATE 2/2/06 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when completing)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Added to Fee	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOSHUA, PATIENCE 610 NW 183RD ST MIAMI FL 33169	☐ Delete		☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD OSHOB, ADETOUN 610 NW 183RD ST #208 MIAMI FL 33169	☐ Delete		☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete		☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete		☐ Change ☐ Add	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete		☐ Change ☐ Add	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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, without other like empowered.					
SIGNATURE:  DATE 2/6/06 786-488-388					



1st MOORE CR2E034 (10/05)

4. FEI Number **65-0064919** Applied For
Not Applicable

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

JOSHUA, PATIENCE O.
3310 NW 178TH ST
MIAMI FL 33056

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when completing)

DATE

FILE NOW!!! FEE IS \$150.00
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CITY-ST-ZIP
PD
JOSHUA, PATIENCE
610 NW 183RD ST
MIAMI FL 33169

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Add

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
OSHOB, ADETOUN
610 NW 183RD ST #208
MIAMI FL 33169

☐ Delete

TITLE
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CITY-ST-ZIP

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2/6/06 786-488-388