2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003251

PO BOX 348433

CORAL GABLES, FL 33234

Address:

City-St-Zip:

FILED Jan 12, 2006 Secretary of State

| D 0 0 0 11 | | | 020 . | | ocorciary or otate | |
|---|--|-------------------|-------------------------------|---|--|--|
| Entity Na | me: ADORAI | DORES L | INIDOS INC. | | | |
| Current Principal Place of Business: | | | | New Principal Plac | e of Business: | |
| | / 3RD LANE KE PINES, FL | 33029 | | | | |
| Current Mailing Address: | | | | New Mailing Addre | New Mailing Address: | |
| P.O; BOX PEMBRO | 297374 KE PINES, FL | 33029 | | | | |
| FEI Number | : 13-4204037 | FEI Nui | mber Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | | |
| 20875 NW PEMBRON The above | ANO, SILVANA | 33029 | US his statement for the p | urpose of changing its registe | red office or registered agent, or both, | |
| SIGNATUI | RE: | | | | | |
| | Electro | nic Signa | ture of Registered Age | nt | Date | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHAN | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | D (PEREZ, DANII 20875 NW 3R PEMBROKE P | D LANE | 33029 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D (ARMENTANO, PO BOX 2975 PEMBROKE P | 74 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | D () ARMENTANO, | () Delete RITA | | Title: Name: | () Change () Addition | |

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: SILVANA ARMENTANO P 01/12/2006