2006 ANI	ON	
DOCUMENT # N110 1. Entity Name 7711 DICKENS AVE., CONE		
Principal Place of Business 7711 DICKENS AVE APT 4 MIAMI BEACH, FL 33141 US	Mailing Address 7711 DICKENS AVE APT 4 MIAMI BEACH, FL 33141	us

FILED Feb 20, 2006 08:00 AN Secretary of State

DO	NOT	WRITE	IN THIS	S SPACE
----	-----	-------	---------	---------

02162006	CR2E034 (11/05)			
4. FEI Number 12-6440571	Applied For Not Applical			
5. Certificate of Status Desired	\$8.75 Additional Fee Required			

6. Name and Address of Current Registered Agent

IBOLYA, FILEP K 7711 DICKENS AVE MIAMI BEACH, FL 33141

DO NOT WRITE IN THIS SPACE

	- ,					4	
	amed entity submits this statement for the p ns of registered agent.	urpose of changing its registere	d office or re	egistered agent, or bo	oth, in the State of FI	orida. I am fami	liar with, and accept
SIGNATURE	ignature, typed or printed name of registered agent and title it	applicable. (NOTE Registered	Agent signature	required when reinstalling)		DATE	<u> </u>
	NOW!!! FEE IS \$150.00 y 1, 2006 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	gnic	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS .					
NAME 1 STREET ADDRESS 7	PD MODIA, DAVID 7711 DICKENS AVE #2 MIAMI BCH., FL 33141				0000004 03/04 /06 -8	42678	
NAME F STREET ADORESS 7	VPD HOMBERTO, CABALLERO 7711 DICKENS AVE #3 MIAMI BCH., FL 33141				113/114/116-8	0031-010	150.00
NAME I STREET ADDRESS 7	VPD BOLYA, FILEP K. 7711 DICKENS AV 4 MIAMI BEACH, FL 33141			DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-SI-ZIP				IN .	THIS SI	PACE	
NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,					<u> </u>
47 I harobu on	etific that the information according with this Ci	ing days not appliful for the age	nationa con	tained in Chapter 11	Clarida Statuton	further earlifu t	hat the information

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.

GNATURE:

GNATURE:

SIGNATURE:

2-16-2006