2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N16729

1. ENTITY NAMES
MUNICIPIO DE SAN JUAN DE LOS YERAS INC.

Mailing Address

C/O IEFFEREY A. NAVARRO 13946 S.W. 13TH STREET MIAMI, FL 33184-3523

Principal Place of Business

C/O JEFFEREY A. NAVARRO 13946 S.W. 13TH STREET MIAMI, FL 33184-3523

FILED Mar 27, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE 03242006 No Chg-NP

 03242006
 No Chg-NP
 CR2E037 (11/05)

 4. FEI Number NOT APPLICABLE
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NAVARRO, JEFFREY A 13946 S.W. 13TH STREET MIAMI, FL 33184-3523

DO NOT WRITE IN THIS SPACE

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 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 Signature, typed or printed name of registered agent and roal of applicable. (NOTE: Registered Agent signature required when rentiating) DATE						
	Filing Fee is \$61.25 Due by May 1, 2006	Election Campaign Finant Trust Fund Contribution.	cing []	\$5.00 May Be Added to Fees		
10,	OFFICERS AND DIRECTORS				<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP AGUILA, JORGE 2262 WEST 74ST #101 HIALEAH, FL 33016				######################################	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OS PEREZ, MARIA E. 6159 W.FLAGLER #104 MIAMI, FL					
INTLE NAMC STREET ADDRESS CITY-ST-ZIP	DT ORAMA, ARTURO 1000 COLONY PT., BLDG.2, #209 PEMBROKE PINES, FL 33026		DO NOT WRITE IN THIS SPACE			
NAME STREET ADDRESS CITY-ST-ZIP	DP NAVARRO, JEFFREY A 13945 S.W. 13TH STREET MIAMI, FL 331843523					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

12. 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 officet or dheek of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 517, Florida Statutes; and that my name appears in Block 10 or Block 11 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

City-ST-ZIP

CHRCLE DE A QUAL DE ORIGINA OFFICER OR OFFIC

03/24/2006 (365) 220-F.