


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Mar 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N38955**  
 1. Entity Name  
**INVINETAN CONDOMINIUM, INC.**




1st MOORE CR2E037 (10/05)

Principal Place of Business Mailing Address  
**C/O SEGUNDO R. HERNANDEZ** **C/O SEGUNDO R. HERNANDEZ**  
**1648 W 42ND PLACE, UNIT C** **1648 W 42ND PLACE, UNIT C**  
**HIALEAH FL 33012** **HIALEAH FL 33012**

2. Principal Place of Business 3. Mailing Address  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 City & State City & State  
 Zip Country Zip Country

4. FEI Number **65-0208908** Applied For Not Applicable  
 5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**HERNANDEZ, SEGUNDO R.**  
**1646 W 42ND PLACE**  
**UNIT C**  
**HIALEAH FL 33012**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-appointing) DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	HERNANDEZ, SEGUNDO	1646 W 42ND PLACE UNIT C	HIALEAH FL	<input checked="" type="checkbox"/>
D	HERNANDEZ, PILAR	1646 W 42ND PLACE UNIT C	HIALEAH FL	<input checked="" type="checkbox"/>
D	SANTORRO, DAISY	1646 W 42 PL, UNIT A	HIALEAH FL	<input checked="" type="checkbox"/>
D	VALDEZ, LIBRADA	1646 W 42 PL, UNIT A	HIALEAH FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Add
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

1100000475256  
 04/05/06-80008-011 61.25

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 617, 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.

SIGNATURE: *Segundo R. Hernandez*

3/15/06 305 362-137