

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 24, 2006 8:00 am
Secretary of State

03-01-2006 90028 009 ****61.25

DOCUMENT # N39909 1. Entity Name CNC MANAGEMENT INC.	
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Principal Place of Business 1223 SW 4 STREET MIAMI, FL 33130-2038	Mailing Address 1223 SW 4 STREET MIAMI, FL 33130-2038
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66011639



DO NOT WRITE IN THIS SPACE

01122006 No Chg-NP CR2E037 (11/05)

4. FEI Number 65-0230452	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DIAZ, GUARIONE M 1223 SW 4 STREET MIAMI, FL 33130-2038

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

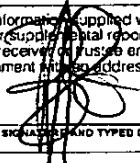
**Filing Fee is \$61.25
Due by May 1, 2006**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DIAZ, GUARIONE M. 1223 SW 4 STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALAN, JUAN 355 COCOPLUM RD MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SWITZER, RAQUEL C 1223 SW 4 STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAVARRO, MARTA 1223 SW 4 STREET 2ND FLOOR MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVP PAZOS, ANDRES 1223 SW 4 STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SANTANA, CRISTINA 1223 SW 4 STREET MIAMI, FL 33135

**DO NOT WRITE
IN THIS SPACE**

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 supplied 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 to this address, with all other like empowered.

SIGNATURE:  **M. BARRETO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/06 305 842334
Date Daytime Phone #

ATTACHMENT

66011639
#N39909

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Barreto, Marielena
1223 SW 4 Street
Miami, Florida 33135