

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005275

FILED
Jan 09, 2006
Secretary of State

Entity Name: BALLET ROSARIO SUAREZ, CORP.

Current Principal Place of Business:

1067 SW 27 AVE.
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

5050 NW 7TH ST
PH 5
MIAMI, FL 33126

New Mailing Address:

FEI Number: 65-0947512 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SUAREZ, ROSARIO
5820 S.W. 8TH STREET
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

SUAREZ, ROSARIO
1067 SW 27 AVENUE
MIAMI, FL 33135 US

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.

SIGNATURE: _____

01/09/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SUAREZ, ROSARIO
Address: 5050 N.W. 7TH STREET
City-St-Zip: MIAMI, FL 33126

Title: SD () Delete
Name: PLANAS, TAHINA
Address: 6491 SW 12 ST.
City-St-Zip: WEST MIAMI, FL 333144

Title: TD () Delete
Name: GARCIA, MARIA A
Address: 1201 SOUTH LEJUNE RD. #204
City-St-Zip: MIAMI, FL 33134

Title: D () Delete
Name: ALVAREZ, ROBERTO
Address: 1940 SW 32 CT.
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: PORTAL, PEDRO
Address: 6491 SW 12ST.
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ROSARIO SUAREZ

PD

01/09/2006

Electronic Signature of Signing Officer or Director

Date