2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000006701

Entity Name: BARU CORP.

FILED Apr 20, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

5001 S. UNIVERSITY DR., #A 5001 S. UNIVERSITY DR., #K

DAVIE, FL 33328 DAVIE, FL 33328

Current Mailing Address: New Mailing Address:

5001 S. UNIVERSITY DR., #A 5001 S. UNIVERSITY DR., #K

DAVIE, FL 33328 DAVIE, FL 33328

FEI Number: 65-1079894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

OCHOA, CARLOS OCHOA, CARLOS 5001 S. ÚNIVERSITY DR., #A 5001 S. UNIVERSITY DR., #K

DAVIE, FL 33328 DAVIE, FL 33328

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: 04/20/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title:

(X) Change () Addition OCHOA, CARLOS Name: Name: OCHOA, CARLOS 5001 S. UNIVERSITY DR., #A 5001 S. UNIVERSITY DR., #K Address: Address:

DAVIE, FL 33328 City-St-Zip: **DAVIE, FL 33328** City-St-Zip:

Title: Title: () Delete (X) Change () Addition

Name: OCHOA, ANIBAL H Name: OCHOA, ANIBAL H 5001 S. UNIVERSITY DR., #A 5001 S. UNIVERSITY DR., #K Address: Address:

DAVIE, FL 33328 **DAVIE, FL 33328** City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete

OCHOA, CECILLIS C Name: OCHOA, CECILLIS C Name: 5001 S. UNIVERSITY DR., #A 5001 S. UNIVERSITY DR., #K Address: Address:

City-St-Zip: **DAVIE, FL 33328** City-St-Zip: **DAVIE, FL 33328**

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS OCHOA D 04/20/2006