

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90409 019 ***150.00

DOCUMENT # P00000012222			
1. Entity Name HARIBO CORPORATION			
Principal Place of Business 169 E. FLAGLER ST., STE 1534 MIAMI, FL 33131		Mailing Address 169 E. FLAGLER ST., STE 1534 STE 635 MIAMI, FL 33131	
2. Principal Place of Business 713 S.E. 1st Avenue		3. Mailing Address 713 S.E. 1st Avenue	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Hallandale Beach, FL		City & State Hallandale Beach, FL	
Zip 33009 Country U.S.		Zip 33009 Country U.S.	
4. FEI Number 59-3620729		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MOTAS, CLAUDIA 17890 NE 34TH CT #3312 NORTH MIAMI BEACH, FL 33160		7. Name and Address of New Registered Agent Name: MATOS, CLAUDIA Street Address (P.O. Box Number is Not Acceptable) 17890 NE 31 CT # 3312 City: North Miami Beach, FL Zip Code 33160	
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: 4-13-6 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DE PAULA, CANDELARIA B <input type="checkbox"/> Delete ESTRADA CAMPO D'AREIS #131, APT 203 JACAREPAGUO - RIO DE JANEIRO, BR 227 4311	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DE PAULA, CANDELARIA B. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition ESTRADA CAMPO D'AREIA # 131, APT 203 JACAREPAGUA - RIO DE JANEIRO, BR 2274311, BRAZIL <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:		4-13-6 (305) 772-6979 <small>Date Daytime Phone #</small>	