


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000014472	
1. Entity Name MEGANO CORPORATION	

Principal Place of Business 8725 NW 117 ST. SUITE 12 HIALEAH GARDENS, FL 33018	Mailing Address 8725 NW 117 ST SUITE 12 HIALEAH GARDENS, FL 33018
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DO NOT WRITE IN THIS SPACE



03142005 No Chg-P CR2E034 (10/03)

4. FEI Number 52-2217168	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANCHEZ, RAUL
8725 NW 117 ST
SUITE 12
HIALEAH GARDENS, FL 33018

**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: *Raul Sanchez* *President* *RSC* *03/14/2005*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees.	11000000265024 03/16/05-80037-022 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SANCHEZ, RAUL 8725 NW 117 ST SUITE 12 HIALEAH GARDENS, FL 33018
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *[Signature]* *03/14/2005* *(786) 280-1251*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #