2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 14, 2006 08:00 AM Secretary of State **DOCUMENT # P00000027795** SALAZAR MANAGEMENT, INC. Mailing Address Principal Place of Business 2621 QUARIL POND WAY KISSIMMEE, FL 34743 2621 QUARIL POND WAY KISSIMMEE, FL 34743 No Cha-P CR2E034 (11/05) 04092006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3645113 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SALAZAR, JORGE L 2621 QUARIL POND WAY KISSIMMEE, FL 34743 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 it applicable. DATE (NOTE: Registered Agent signature required when rehatating) \$5.00 May Be Added to Fees . Election Cernosion Financino FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE SALAZAR, JORGE L NAME 2621 QUARIL POND WAY STREET ADDRESS KISSIMMEE, FL 34743 CITY-ST-ZIP 7171LE SALAZAR, JESUS NAME STREET ADDRESS 2621 QUARIL POND WAY CITY-ST-ZIP KISSIMMEE, FL 34743 TOTAL E NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions comained 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:

STREET ADDRESS
CATY-ST-EP
TITLE
NAME
STREET ADDRESS
CATY-ST-EP

MULL ALGGA JORG TORO CHATTER OF THE OFFICER OR DIRECTO

Jonge Salazar a

407/346072

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