2006 FOR PROFIT CORPORATION ANNUAL REPORT

05-04-2006 90513 001 *1,411.25
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DOCUMENT # P00000080013

1. Entity Name
CTCOP MIAMI INC.

FILED
06 MAY 26 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
660146985

Principal Place of Business	Mailing Address
1114 S. DOUGLAS ROAD SUITE 6 CORAL GABLES, FL 33134	1114 S. DOUGLAS ROAD SUITE 6 CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

04202006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1033876
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

AGRAMUNT, LUIS
1114 S. DOUGLAS ROAD
SUITE 6
CORAL GABLES, FL 33134

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MARTIN, SERGIO MARRERO
STREET ADDRESS	1114 S. DOUGLAS ROAD, SUITE 6
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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CITY-ST-ZIP	

$5/28

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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: SERGIO MARRERO (PRO) 04/11/2006 (305) 448-3077
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #