2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 27, 2006 08:00 AM Secretary of State

ANNUAL REPORT				Carratary of Ctata			
DOCUMENT # P00000105928				Secretary of State			
	RICAN GENERAL BUSINESS	INC.					
Principal Place of Business Mailing Address 777 BRICKELL AVE, SUITE 1070 777 BRICKELL A MIAMI, FL 33131 MIAMI, FL 3313		Aailing Address 777 BRICKELL AVE, SUITE 107 MIAMI, FL 33131	70				
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			V L	4. FEI Numb 22-377		÷0.7	Applied For Not Applicable 5 Additional
			<u>-</u>	5. Certificate	of Status Desired		equired
	6. Name and Address of Current Reg	stered Agent			· . _		
KENNEY, JUDITH 777 BRICKELL AVE, SUITE 1070				DO	NOT W	RITE	<i>H</i> .
MIAMI, FL 33131			IN THIS SPACE				
8. The above the obligat	named entity submits this statement for the ions of registered agent	purpose of changing its register	ed office or register	ed agent, or bo	ith, in the State of Fi	orida, t am tamilia	with, and accep
SIGNATURE.	Signature, typed or printed name of registered agent and to	e il applicable (NOTE: Registere	ed Agent signature required	when rematating)		DATE	•
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.				00 May Be ed to Fees			
10.	OFFICERS AND DIR	CTORS	I		<u> </u>	· 	
DITLE NAME	PTD BITTAN, YAACOV		1				* * * · · - * · ·
STREET ADDRESS	777 BRICKELL AVENUE, SUITE 101 MIAMI, FL 33131	ra			00000 00 112 200 200)449978 -80075-012	ะ ระกษณ์ "
TITLE	VPSD	<u> </u>	1		001 001 00	00013-012	130.60
NAME STREET ADDRESS	BITTAN, AVIVA L 777 BRICKELL AVE., SUITE 1070		1				
CiTY-ST-ZIP	MIAMI, FL 33131	·					
TITLE NAME			ł				
STREET AODRESS CITY-S1-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS			IN THIS SPACE				
C(TY-\$1-Z(P)			1				
TITLE			j				

12. Thereby certify that the information supplied with this filling 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 it 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 mile an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP DILE NAME STREET ADDRESS CITY-ST-ZIP

EGNATURE AND EXPEDIT PRINT

Eq'a Agent

6 (506) 373 - 788