

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 05, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P00000109649 1. Entity Name GILBERTO Y JULIAN DE LOS RIOS & COMPANY INC.	
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Principal Place of Business 3684 PINE HURST DR #1 LAKE WORTH, FL 33467	Mailing Address 3684 PINE HURST DR #1 LAKE WORTH, FL 33467
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**DO NOT WRITE IN THIS SPACE**



05012006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1059578	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
  
 DE LOS RIOS, GILBERTO  
 11470 NW 4TH LANE  
 MIAMI, FL 33172

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**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

U00000563010  
 05/19/06-80078-012 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DE LOS RIOS, GILBERTO 11470 NW 4TH LANE MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVD DE LOS RIOS, JULIAN 11470 NW 4TH LANE MIAMI, FL 33172
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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: Gilberto Rios  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #