

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000005698

Entity Name: COL-MIA ENTERPRISES, INC.

FILED
Jul 25, 2006
Secretary of State

Current Principal Place of Business:

1840 WEST 49TH ST., #220-15
HIALEAH, FL 33012

New Principal Place of Business:

1840 WEST 49TH ST.,
SUITE #220-15
HIALEAH, FL 33012

Current Mailing Address:

1840 WEST 49TH ST., #220-15
HIALEAH, FL 33012

New Mailing Address:

1840 WEST 49TH ST.,
SUITE # 220-15
HIALEAH, FL 33012

FEI Number: 45-1068664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARCIA, WILLIAM
1840 WEST 49TH ST., #220-15
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

GARCIA, WILLIAM
1840 WEST 49TH ST.
SUITE # 220-15
HIALEAH, FL 33012 US

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.

SIGNATURE: WILLIAM GARCIA

07/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: URIBE, DIANA P
Address: 6625 W 4 AVE., APT. 209
City-St-Zip: HIALEAH, FL 33012

Title: MR. () Delete
Name: GARCIA, RAFAEL
Address: 6625 WEST 4TH AVE APT 209
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS (X) Change () Addition
Name: URIBE, DIANA P
Address: 18942 NW 86TH COURT UNIT # 4104
City-St-Zip: HIALEAH, FL 33015

Title: MR. (X) Change () Addition
Name: GARCIA, RAFAEL
Address: 6709 NW 190 STREET
City-St-Zip: HIALEAH, FL 33015

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANA DEL P URIBE

MS

07/25/2006

Electronic Signature of Signing Officer or Director

Date