2006 FOR PROFIT CORPORATION ANNUAL REPORT

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STREET ADDRESS CTTY-ST-ZIP

SIGNATURE:

changed, or on an attachment with an address, with all other like empowered.

Apr 28, 2006 8:00 am Secretary of State **DOCUMENT # P01000023289** 04-28-2006 90205 003 ***150.00 ECO TERRA NOSTRA CORPORATION Principal Place of Business Mailing Address 00030114 7027 NW 7TH AVENUE 305 NW 136TH CT MIAMI, FL MIAMI, FL 33182 04192006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3610785 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHAO, BIENVENDIO DO NOT WRITE 7027 NW 7TH AVENUE MIAMI, FL 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 if applicable (NOTE: Registered Agent signature required when rematating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150,00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE CHAO, BIENVENIDO STREET ADDRESS 305 NW 136TH CT CTTY-ST-ZIP MIAMI, FL 33182 NAME STREET ADDRESS CITY-ST-7P TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME

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 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

CTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED