2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000040073

Current Principal Place of Business:

Entity Name: BAIRES INTERNATIONAL CORP.

FILED Feb 25, 2006 Secretary of State

1314 THROCKMORTON DR WESLEY CHAPEL, FL 33543 **Current Mailing Address: New Mailing Address:** 5125 PALM SPRINDS BLVD HILLSBOROUGH, FL 33647 FEI Number: 59-3714127 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BELTRAN, FABRIZZIO H HILLARY, BURLEW A D 5125 PALM SPRINGS BLVD 5125 PALM SPRINGS BLVD 2202 2202 TAMPA, FL 33647 US TAMPA, FL 33647 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.

New Principal Place of Business:

Election Campaign Financing Trust Fund Contribution ().

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

TAMPA, FL 33647

City-St-Zip:

SIGNATURE: HILARY BURLEW

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

02/25/2006

Date

Title: () Delete () Change () Addition Name: MINIELLO, JOSE L Name: 5125 PALM SPRINGS BLVD 2202 Address: Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MINIELLO, JUAN JOSE Name: 5125 PALM SPRINGS BLVD 2202 Address: Address: TAMPA, FL 33647 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition BELTRAN, FABRIZZIO H Name: HILLARY, BURLEW A D Name: 5125 PALM SPRINGS BLVD 2202 5125 PALM SPRINGS BLVD 2202 Address: Address:

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.

City-St-Zip:

TAMPA, FL 33647

SIGNATURE: JUAN JOSE MINIELLO D 02/25/2006